Box 15044

Cert. 491236
Clemence Haute

Neighbors

~~CLAIMANT'S~~ AFFIDAVIT.

State of Michigan, **County of** Menominee

In the matter of Clemence Haute Widow of Pierre Haute

late a Private in Co. H of the 34 Reg't of Wis Inf Vols., for

On this 19th day of Oct, A. D., 1898, personally appeared before me, a notary Public in and for the aforesaid County, duly authorized to administer oaths, Barny Nadeauss, aged 73 years, a resident of Nadeau Mich in the County of Menominee and State of Mich, whose Postoffice address is Nadeau Mich and well known to me to be reputable and entitled to credit, and who, being duly sworn, declares as follows:

That ~~is the claimant in the above-mentioned cause, and that~~ I was personally acquainted with Pierre Haute and knew him when he enlisted in the United states army in 1862 on Dec 6 and for a long time previous thereto and also knew when he left the army in 1863 and know from my own personal knowledge that he has never belonged to any other military or naval organization in the United States prior to Dec 6 1862 or subsequent to Sept 8th 1863 for if he had belonged to any other Military or Naval Organizations I must have known of such fact.
I further certify that I am not personally interested in this case nor concerned in its prosecution.

U. S. PENSION OFFICE. NOV 1 1898

If affiant signs by mark, two persons who can write sign here.

Barny Nadeau
Signature of Affiant.

M.P. 0838,

State of Michigan, County of Menominee, ss:

Sworn to and subscribed before me this 19 day of Oct, A. D. 1898, by the above-named affiant, and I certify that I read said affidavit to said affiant, including all the words Claimants and is the Claimant in the above mentioned cause and that erased, and all the words Neighbors added, and acquainted Him with its contents before He executed the same. I further certify that I am in nowise interested in said case, nor am I concerned in its prosecution; and that said affiant is personally known to me, and that He is credible person.

Peter Garrigan
Official Signature.

(L. S.)

Notary Public
Official Character.

PETER GARRIGAN NOTARY PUBLIC

I, ... clerk of the County Court in and for aforesaid County and State, do certify that .... Esq. who hath signed his name to the foregoing declaration and affidavit, was at the time of so doing .... in and for said County and State duly commissioned and sworn; that all his official acts are entitled to full faith and credit, and that his signature thereunto is genuine.

Witness my hand and seal of office, this .... day of .... 189 .

....

[L. S.] Clerk of the ....

This affidavit may be sworn to before any officer authorized to administer oaths. If executed before a Notary or Justice, however, the certificate of Clerk of Court should be attached, showing official capacity of said Notary or Justice, if such certificate be not already on file.

ADDITIONAL EVIDENCE.

CLAIM OF

Clemence Houte Widow

of Pierre Houte

Late Private in Co. K 34 Reg't.

of Mich Inf Vols.

Character of Claim.

General Law

Widows (Act of June 27/90)

No. 653276

CLAIMANT'S AFFIDAVIT.

FILED BY

J. R. Cralle & Co.,
Pension Attorneys,
CRALLE BUILDING,
108 C Street, N. W.,
WASHINGTON, D. C.

1898

O13

POWER OF ATTORNEY.

☞Execute this before an officer having a seal.

Known all Men by his Presence, That I, Clemence Hause Widow of Pierre Hause Late of Co H of the 34" Reg't of Wisc Inft of Nathau in the State of Mich, have made, constituted, and appointed,

(Here state your Name. State your Rank. Letter of your Co. Here state No. of your Reg't. Here name State to which your Reg't was accredited, and whether Infantry, Cavalry or Artillery. Here state Postoffice address. Name the state.)

and by these presents do constitute and appoint **J. B. CRALLE & CO.,** of Washington, D. C., my true and lawful attorneys, irrevocable for me, and in my name, place, and stead, hereby annulling and revoking all former Powers of Attorney or authorizations whatever in the premises to prosecute to a final settlement my claim for Widows (act of June 27/90) Pension No. ...., now on file in the United States Pension Office,

(Here state No. of your claim, if you know it.)

Washington, D. C. That my reasons for wishing to employ another attorney are as follows:

Have never employed any other attorney

If you have never employed an attorney in your case, state that fact on above lines. If you have ever employed an attorney, state your reasons for wishing to employ another attorney, as for instance: "Former attorney dead;" "or, have not heard from my former attorney for over a year;" "or, my attorney has abandoned my claim," or as the case may be. Please state reasons as fully as you can.

and to, from time to time, furnish any further evidence necessary or that may be demanded, giving and granting to my said attorneys full power and authority to do and perform all and every act and thing whatsoever requisite and necessary to be done in and about the premises as fully to all intents and purposes as I might or could do, if personally present at the doing thereof, with full power of substitution and revocation, hereby ratifying and confirming all that my said attorneys or their substitutes may or shall lawfully do or cause to be done by virtue hereof.

In witness whereof I hereunto set my hand and seal this 4 day of May, eighteen hundred and ninety-seven

Clemence her X mark Hauk [L. S.]

(Claimant sign on above line.)

In presence of—

Peter Garrigan

Jos. Servais

☞Signature of Claimant *must* be attested by two witnesses.

P.O.a.

State of Michigan, County of Menominee, SS

BE IT KNOWN, That on this 4 day of May in the year eighteen hundred and ninety Seven, before me the undersigned, at Carney in and for said County and State, personally appeared Clemence Hause, to me well known to be the identical person who executed the foregoing Letter of Attorney, and the same having been first fully read over to her and the contents thereof duly explained, acknowledge the same to be her act and deed, and that I have no interest, present or prospective, in the claim.

IN TESTIMONY WHEREOF I have hereunto set my hand and affixed my seal of office the day and year last above written.

Peter Garrigan
Notary Public

POWER OF ATTORNEY.

No. 653.276
State Number of Claim.

CLAIM OF

Clemence Haute Widow of Pierre Conte Co. H 34th Wis. Inft.
Here state your Name.

FOR

Widow's Pension
Act June 27/90.
Here state Character of Claim.

are we recognized

PENSION OFFICE
JUL 27 1897

FILED BY
J. B. Cralle & Co.,
Pension Attorneys,
CRALLE BUILDING,
108 C St., N. W., Washington, D. C.

Claimant's

~~GENERAL~~ AFFIDAVIT.

☞"This blank can be used for affidavit of **ONE WITNESS**, or for **TWO WITNESSES** having knowledge of the same facts.

State of Michigan County of Menominee, ss:

In the matter of Clemence, widow of Pierre Haute

late a Private in Co. of the 34

Reg't of Wis Inf Vols., for

On this 25 day of May, A. D., 1899, personally appeared before me, a Notary Public in and for the aforesaid County, duly authorized to administer oaths, Clemence Houle, aged 58 years, a resident of Molthan in the County of Menominee and State of Michigan whose Postoffice address is Molthan Mich.

and aged years a resident of in the County of and State of, whose Postoffice address is and well known to me to be reputable and entitled to credit, and who, being duly sworn, declared in relation to aforesaid case as follows:

That have been well and personally acquainted with

~~for years, and years, respectively and that~~ and stated as follows I am the claimant in the aforementioned cause. I was married to Jean Batiste Charlier in Belgium and it is the custom in Belgium when a womans Husband Dies that the widow shall take her Maiden name if she marries again to be married under and as I did not know the custom in this country I therefore gave my name as Clemence Accour and was married to Pierre Houle under the name of Clemence Accour, Accour being my Maiden name.

PENSION
I
JUN
28
1899
U. S.
OFFICE.

Clmt - Explaining discrepancy in name

further declare that I Have no interest in said case and am ~~not~~ concerned in its prosecution.

Ruth Garrigan
Alma Carlson
If either affiant signs by mark, two persons who write sign here.

Clemence Her x mark Haute
Signatures of Affiants.

State of Michigan, County of Menominee, ss:

Sworn to and subscribed before me this 25 day of May, A. D. 1899, by the above-named affiant , and I certify that I read said affidavit to said affiant , including all the words erased, and all the words added, and acquainted Her with its contents before she executed the same. I further certify that I am in nowise interested in said case, nor am I concerned in its prosecution; and that said affiant is personally known to me, and that she is a credible person.

Peter Garrigan
Official Signature.

(L. S.)

Notary Public
Official Character.

NOTE.—This can be executed before any officer authorized to administer oaths for general purposes.

☞ Affiants should state their means of knowledge of the facts to which they testify, and should draw their pen through all the unused lines on this blank.

JP

ADDITIONAL EVIDENCE.

CLAIM OF
Clemence Haute Wid of
Pierre " "
Late in Co. "H" 34 " Reg't.
of Wis. Inf. Vols.

Character of Claim.
Widows — New Law

No. 653276

RECEIVED
JUN 24 1899
WESTERN DIVISION.

FILED BY
J. B. Cralle & Co.,
PENSION ATTORNEYS,
CRALLE BUILDING,
108 C St., N. W., WASHINGTON, D. C.

GENERAL AFFIDAVIT

State of Michigan, County of Menominee

In the matter of Clemence Haute widow of Pierce Haute late a Private in Co. H of the 34 Reg't of Wisc Inft Vols., for Widow's Pension

On this 11th day of Aug, A. D., 1897, personally appeared before me, a Notary Public in and for the aforesaid County, duly authorized to administer oaths, Clemence Haute, aged ——— years, a resident of Nathan in the County of Menominee and State of Mich, whose Postoffice address is Nathan Mich and well known to me to be reputable and entitled to credit, and who, being duly sworn, declared in relation to aforesaid case as follows:

(Affiant should state his means of knowing the facts to which he testifies.)

PETER GARRIGAN

I Clemence Haute do hereby certify that I have no Property of any kind whatever and no means of support and there is no Person on earth Legally bound to support me I have no bonds no stocks no investments of any kind & no means or ability to make a living for my self and I do further declare that I have intrest in said case and I am concerned in its Prosecution

Witnessed By

Ruth Garrigan

Jos Servais

Clemence her X Haute mark

further declare that ... no interest in said case not concerned in its prosecution.

Ruth Garrigan

Jos Servais

If affiant signs by mark, two persons who can write sign here.

Clemence her X Haute mark

Signature of Affiant.

U. S. PENSION OFFICE G SEP 11 1897

Clmt. M.O.S.

Clmt - dependence

State of Michigan, County of Menominee, ss:

Sworn to and subscribed before me this 11th day of Aug, A. D. 1897, by the above-named affiant, and I certify that I read said affidavit to said affiant, including all the words erased, and all the words added, and acquainted Her with its contents before She executed the same. I further certify that I am in nowise interested in said case, nor am I concerned in its prosecution; and that said affiant is personally known to me, and that She is a credible person.

(L. S.)

Peter Garrigan
Official Signature.

Notary Public
Official Character.

I, ... clerk of the County Court in and for aforesaid County and State, do certify that .... Esq. who hath signed his name to the foregoing declaration and affidavit, was at the time of so doing .... in and for said County and State duly commissioned and sworn; that all his official acts are entitled to full faith and credit, and that his signature thereunto is genuine.

Witness my hand and seal of office, this .... day of .... 189 .

[L. S.]

Clerk of the ....

This affidavit may be sworn to before any officer authorized to administer oaths. If executed before a Notary or Justice, however, the certificate of Clerk of Court should be attached, showing official capacity of said Notary or Justice, if such certificate be not already on file.

ADDITIONAL EVIDENCE.

CLAIM OF
Clemence Haute
Widow Pierre Haute
of
Late in Co. "H" 34 Reg't.
of Wisc. Inft. Vols.

Character of Claim.
Widow's Pension
No 653.276

FILED BY
J. B. Cralle & Co.,
Pension Attorneys,
CRALLE BUILDING,
108 C Street, N. W.,
WASHINGTON, D. C.

GENERAL AFFIDAVIT

State of Michigan, **County of** Menominee

In the matter of Clemence Haute widow of Pierre Haute

late a Private in Co. H. of the 34" Reg't of Wisc. Inft. Vols., for Widow's Pension

On this 25 day of June, A. D., 1897, personally appeared before me, a Notary Public in and for the aforesaid County, duly authorized to administer oaths, John Dupont, aged 50 years, a resident of Nadeau ; and Barney Nadeau sr — aged 70 years a resident of Nadeau in the County of Menominee and State of Mich, whose Postoffice address is Nadeau Mich. and well known to me to be reputable and entitled to credit, and who, being duly sworn, declared in relation to aforesaid case as follows:

(Affiant should state his means of knowing the facts to which he testifies.)

I John Dupont and I Barney Nadeau sr Have Known Mrs Clemence Haute for 27 years: and since the date of her marriage with Pierre Haute Continuously up to the time of his death & we know, that the said Clemence Haute has never been Divorced from him the said Pierre Haute.

Subscribed and sworn to before Me this 25 day of June A.D. 1897
Peter Garrigan
Notary Public

John Dupont
Barney Nadeau sr

We do further declare that We have no interest in said case and are not concerned in its prosecution.

John Dupont
Signature of Affiant.

If affiant signs by mark, two persons who can write sign here.

No div

No divorce

Barney Nadeau, Sr.

State of Michigan County of Menominee, ss:

Sworn to and subscribed before me this 25 day of June, A. D. 1897, by the above-named affiants, and I certify that I read said affidavit to said affiants, including all the words ---------- erased, and all the words ---------- added, and acquainted them with its contents before they executed the same. I further certify that I am in nowise interested in said case, nor am I concerned in its prosecution; and that said affiants are personally known to me, and that they are credible persons

(L. S.) Peter Garrigan

Peter Garrigan
Official Signature.

Notary Public
Official Character.

I, ---------- clerk of the County Court in and for aforesaid County and State, do certify that ---------- Esq. who hath signed his name to the foregoing declaration and affidavit, was at the time of so doing ---------- in and for said County and State duly commissioned and sworn; that all his official acts are entitled to full faith and credit, and that his signature thereunto is genuine.

Witness my hand and seal of office, this ---------- day of ---------- 189 .

[L. S.] Clerk of the ----------

This affidavit may be sworn to before any officer authorized to administer oaths. If executed before a Notary or Justice, however, the certificate of Clerk of Court should be attached, showing official capacity of said Notary or Justice, if such certificate be not already on file.

PENSION B JUL 27 1897 U. S. OFFICE.

Act June 27/90.

ADDITIONAL EVIDENCE.

CLAIM OF

Clemence Haute
Widow of
Pierre Haute

Late ---------- in Co. K 34th Reg't.

of Wis. Inft Vols.

Character of Claim.

Widow's Pension

No 653.276.

PENSION B JUL 27 1897 U. S. OFFICE.

FILED BY

J. B. Cralle & Co.,
Pension Attorneys,
CRALLE BUILDING,
108 C Street, N. W.,
WASHINGTON, D. C.

GENERAL AFFIDAVIT.

☞This blank can be used for affidavit of **ONE WITNESS**, or for **TWO WITNESSES** having knowledge of the same facts.

State of Michigan County of Menominee, ss:

In the matter of Clemence Houle Wid of Pierre Houle

late a Private in Co. H of the 34

Reg't of Wisc Inft Vols., for

On this 22nd day of November, A. D., 1898, personally appeared before me, a Notary Public in and for the aforesaid County, duly authorized to administer oaths, Eugene Houle, aged 34 years, a resident of Nathan in the County of Menominee and State of Michigan, whose Postoffice address is Nathan Mich

and Paul Brunette aged 37 years a resident of Nathan in the County of Menominee and State of Mich whose Postoffice address is Nathan Mich and well known to me to be reputable and entitled to credit, and who, being duly sworn, declared in relation to aforesaid case as follows:

That they have been well and personally acquainted with Clemence Houle for 23 years, and 6 years, respectively and that

from said knowledge and acquaintance We know that Clemence Houle is in destitute circumstances and has no means of support or no way of making a living and there is no person in our knowledge legally bound to support her the said Clemence Houle all of this we know from a long and intimate acquaintance with the said Clemence Houle and we has not personally interest in her case nor concerned in its prosecution.

M. O. 8 -

further declare that no interest in said case not concerned in its prosecution.

E Haute

Paul Burnette

If either affiant signs by mark, two persons who write sign here.

Signatures of Affiants.

State of Michigan, County of Menominee, ss:

Sworn to and subscribed before me this 22 day of November, A. D. 1898, by the above-named affiants, and I certify that I read said affidavit to said affiants, including all the words I erased, and all the words we added, and acquainted them with its contents before they executed the same. I further certify that I am in nowise interested in said case, nor am I concerned in its prosecution; and that said affiants are personally known to me, and that they are credible persons

Peter Garrigan
Official Signature.

Notary Public
Official Character.

(L. S.)

NOTE.—This can be executed before any officer authorized to administer oaths for general purposes.

☞ Affiants should state their means of knowledge of the facts to which they testify, and should draw their pen through all the unused lines on this blank.

ADDITIONAL EVIDENCE.

CLAIM OF

Clemence Haute Widow of Pierre Haute

Late ... Co. I, 34th Reg't. of Wis. Inft. Vols

Character of Claim.

Widow's Pension Act June 27/90 + Genl. Law

No 653.276.

Filed for the purpose of having claim made Special.

NOV 10 1898 COMMISSIONER

FILED BY

J. B. Cralle & Co.,
Pension Attorneys,
CRALLE BUILDING,
108 C Street, N. W.,
WASHINGTON, D. C.

LAW DIVISION APR 30 1897 RECORDED.

Summons Circuit Court, State of Wisconsin:
Circuit Court for Brown County

Peter Haute
Plaintiff
vs
Mary Theresia Haute
Defendant

The State of Wisconsin
to the above named
defendant.

You are hereby summoned and required to answer the complaint in this action which will be filed in the Office of the Clerk of the Circuit Court in and for said County of Brown at the City of Green Bay, and to serve a copy of your answer on the subscribers at their office in the City of Green Bay and County of Brown, Wisconsin, within twenty days after the service hereof exclusive of the day of such service, and if you fail to answer the complaint as aforesaid the plaintiff will apply to the Court for the relief demanded in said plaintiffs complaint.

Witness the Hon E. H. Ellis Judge of said Court at Green Bay in said County the 4th day of October 1871.

Hudd & Wigman
Plaintiffs Attorneys

U.S. PENSION OFFICE APR 29 1897

LAW DIVISION APR 30 1897 RECORDED.

divorce.

W

Circuit Court Brown County

Peter Haute
vs Pltff
Mary Theresia Haute
Deft

State of Wisconsin
County of Brown ss Peter Haute being duly sworn says that he is the pltff above named, that this action is brought for divorce in one of the cases prescribed by law and that a cause of action therefor exists in his favor against the defendant,

That this plaintiff was married to the deft at the town of Green Bay in said County on the 2nd day of June 1856 and that they have ever since resided in either the said town of Green Bay or the City of Green Bay in said County That on or about the 25th day of April 1871 and at divers other times the deft committed adultery with one Joseph Haute that since the commission of said adultery the said deft Mary Theresia Haute left this plaintiff and eloped with the said Joseph Haute That the deft cannot be found within this State, although diligent effort to find her and to serve upon her the summons herein has been made That deponent is informed and verily believes that the said deft Mary Theresia and the said Joseph Haute are in the State of Michigan the Exact whereabouts deponent has been unable to ascertain.

Subscribed + sworn to
before me this 3rd of
October 1871
J H M Wigman
Not Pub Wis

his
Peter X Haute
mark

U.S. PENSION OFFICE

RECEIVED.
APR 30 1897
DIVISION

13

Brown County Circuit Court.

Peter Haute
Pltff
vs
Mary Theresia Haute
Deft

It appearing to my satisfaction by the affidavit of Peter Haute that a cause of action exists against the above named defendant for divorce in one of the cases provided by law, and that said defendant cannot be found within this State: I do order that the summons in this action be served on such defendant, by the publication thereof, once in each week for six successive weeks, in the newspaper printed in the County of Brown, called the Green Bay Advocate

E. H. Ellis
Oct 4th. 1871. Circt Judge

U.S. PENSION OFFICE
C
APR 29 1897

LAW DIVISION RECEIVED.
APR 30 1897

State of Wisconsin }
County of Brown } ss Albert C. Robinson being duly sworn, on his oath says, that he the printer & publisher of the Green Bay Advocate, a newspaper published in said ~~Brown~~ County of Brown, and that the notice of which the annexed is a copy, was published in said newspaper for six successive weeks, once in each week, commencing on the 5th day of October AD, 1871.

Subscribed & sworn to before me this 18th day of December 1871. A. C. Robinson

C. D. Suydam
Notary Public.

State of Wisconsin, Circuit Court for Brown County.

Peter Haute, plaintiff vs. Mary Theresia Haute, defendant.

The State of Wisconsin to the above named defendant:

You are hereby summoned and required to answer the complaint in this action, which will be filed in the Office of the Clerk of the Circuit Court in and for said County of Brown at the City of Green Bay, and to serve a copy of your answer on the subscribers at their office in the City of Green Bay, and County of Brown, within twenty days after the service hereof, exclusive of the day of such service; and if you fail to answer the complaint as aforesaid, the plaintiff will apply to the Court for the relief demanded in said plaintiff's complaint.

Witness, the Hon. E. H. Ellis, Judge of said Court, at Green Bay, in said County, this 4th day of October, AD, 1871.

Hudd & Wigman
Plaintiff's Attorneys

11-6w

Green Bay Dec 18, 1871.

Received of Messrs Hudd & Wigman Four Dollars and 70 cents in full of the above notice, as sworn to.

Publishers of the Green Bay Advocate

U.S. PENSION OFFICE
APR 29 1897

LAW DIVISION
RECEIVED
APR 30 1897

GENERAL AFFIDAVIT

State of Michigan, County of Menominee

In the matter of Clemence Haute widow of Pierre Haute late a Private in Co. H of the 34 Reg't of Wisc. Inft Vols., for

On this 22 day of June, A. D., 1897, personally appeared before me, a Notary Public in and for the aforesaid County, duly authorized to administer oaths, John Straik, aged 38 years, a resident of Nathan
Louis Augustine aged 40 years a Resident of Nathan
in the County of Menominee and State of Mich., whose Postoffice address is Nathan Mich and well known to me to be reputable and entitled to credit, and who, being duly sworn, declared in relation to aforesaid case as follows:

I John Straik do hereby testify that I

(Affiant should state his means of knowing the facts to which he testifies.)

Have known Mrs Clemence Haute for three years & that she has no Property of any Kind Whatever and no means of support except the Charity of her relatives. John Straik

Subscribed & Sworn to before me this 22nd day of June A D 1897
Peter Garrigan
Notary Public

I Louis Augustin being duly sworn Deposes & says I have known Mrs Clemence Haute for four years and know from my own Personal Knowledge that she has no Property of any kind and no means of support except the charity of her relatives.

Subscribed & Sworn to before me this 22nd day of June A.D. 1897
Peter Garrigan
Notary Public

Loui Agustin

We do further declare that We have no interest in said case and are not concerned in its prosecution.

John Straik
Signature of Affiant.

If affiant signs by mark, two persons who can write sign here.

Loui agustin
signature of affiant

Dependence

M.O.S.

State of Michigan . County of Menominee , ss:

Sworn to and subscribed before me this 22 day of June , A. D. 1897, by the above-named affiant , and I certify that I read said affidavit to said affiant , including all the words erased, and all the words added, and acquainted them with its contents before they executed the same. I further certify that I am in nowise interested in said case, nor am I concerned in its prosecution; and that said affiant are personally known to me, and that they are credible persons

(L. S.)

Peter Garrigan
Official Signature.

Notary Public
Official Character.

I, clerk of the County Court in and for aforesaid County and State, do certify that Esq. who hath signed his name to the foregoing declaration and affidavit, was at the time of so doing in and for said County and State duly commissioned and sworn; that all his official acts are entitled to full faith and credit, and that his signature thereunto is genuine.

Witness my hand and seal of office, this day of 189 .

[L. S.]

Clerk of the

This affidavit may be sworn to before any officer authorized to administer oaths. If executed before a Notary or Justice, however, the certificate of Clerk of Court should be attached, showing official capacity of said Notary or Justice, if such certificate be not already on file.

ADDITIONAL EVIDENCE.

CLAIM OF

Clemence Hayte Wid of Pierre Haute

Late in Co. H 34th Reg't. of Wis Inft Vols.

Character of Claim.

Widow's Pension

No 653,276-

PENSION
JUL 27 1897
U. S.
OFFICE.

FILED BY

J. B. Cralle & Co.,
Pension Attorneys,
CRALLE BUILDING,
108 C Street, N. W.,
WASHINGTON, D. C.

GENERAL AFFIDAVIT.

☞This blank can be used for affidavit of **ONE WITNESS**, or for **TWO WITNESSES** having knowledge of the same facts.

State of Michigan County of Menominee, ss:

In the matter of Clemence Haute Widow of Pierre Haute

late a Private in Co. H of the 34

Reg't of Wis Inf. Vols., for

On this 28th day of May, A. D., 1898, personally appeared before me, a Notary Public in and for the aforesaid County, duly authorized to administer oaths, Gideon T. Werline, aged 47 years, a resident of Nadeau in the County of Menominee and State of Michigan, whose Postoffice address is Nadeau Menominee Co. Mich

and aged years a resident of in the County of and State of whose Postoffice address is and well known to me to be reputable and entitled to credit, and who, being duly sworn, declared in relation to aforesaid case as follows:

That I have been well and personally acquainted with Mrs. Clemence Houte widow of Pierre Houte for Five years, and years, respectively and that She is the Claimant in the above mentioned case and that he the said Gideon T. Werline is the Supervisor of Nadeau Township Menominee Co. Mich. and has charge of the assessment and tax rolls for said township and that there appears on said assessment and tax rolls no property of any kind assessed to the said Clemence Houte or to the said Pierre Houte decd. and further saith not

PENSION OFFICE
G
JUL 8 1898
U. S.

A. R.,

I further declare that I have no interest in said case and am not concerned in its prosecution.

Calvin Hart — G. T. Wesline

If either affiant signs by mark, two persons who write sign here. — Signatures of Affiants.

State of Mich, County of Menominee, ss:

Sworn to and subscribed before me this 28 day of May, A. D. 1898, by the above-named affiant, and I certify that I read said affidavit to said affiant, including all the words erased, and all the words added, and acquainted with its contents before he executed the same. I further certify that I am in nowise interested in said case, nor am I concerned in its prosecution; and that said affiant is personally known to me, and that he is a credible person.

Peter Garrigan
Official Signature.

(L. S.)

Notary Public
Official Character.

PETER GARRIGAN NOTARY PUBLIC CARNEY MICHIGAN

NOTE.—This can be executed before any officer authorized to administer oaths for general purposes.

☞ Affiants should state their means of knowledge of the facts to which they testify, and should draw their pen through all the unused lines on this blank.

ADDITIONAL EVIDENCE.

CLAIM OF

Clemence Hauter widow of
Pierre Hauter

Late I in Co. H 34 Reg't.
of Wis. Inf. Vols.

Character of Claim.
Act of June 27 1890
Widow - General Law

No. 653276

FILED BY
J. B. Cralle & Co.,
Pension Attorneys,
CRALLE BUILDING,
108 C Street, N. W.,
WASHINGTON, D. C.

GENERAL AFFIDAVIT.

State of Wisconsin, **County of** Brown

In the matter of Clemence Haute Widow of Pierre Haute

late a Private in Co. H of the 34 Reg't of Wisc. Inft Vols., for

On this 29 day of October, A. D., 1897, personally appeared before me, a Notary Public in and for the aforesaid County, duly authorized to administer oaths, G. E. Matille, aged 58 years, a resident of Green Bay in the County of Brown and State of Wisconsin, whose Postoffice address is Green Bay Wis. and well known to me to be reputable and entitled to credit, and who, being duly sworn, declared in relation to aforesaid case as follows:

That on the 25th day of March A.D. 1872 in the

(Affiant should state his means of knowing the facts to which he testifies.)

City of Green Bay in said County and State aforesaid Mr Pierre Houte of the city of Green Bay and Mrs Clemence Accour of the Same Place were with their mutual consent Legally joined together in Holy matrimony which was duly solemnized by me in the Presence of Eli Martin and Jean Baptiste Dupont of the city of Green Bay in the County of Brown Attending Witnesses Having been first satisfied by the oath of Mr Pierre Houtte duly administered by me that there were no legal impediments to such Marriage.

PENSION OFFICE
NOV 10 1897
U. S.

Affiant further declare that He has no interest in said case and is not concerned in its prosecution.

D H Martin

G. E. Matile
Signature of Affiant.

If affiant signs by mark, two persons who can write sign here.

M. Ctf. to Sol. Mge

State of Wisconsin, County of Brown, ss:

Sworn to and subscribed before me this 29th day of October, A. D. 1897, by the above-named affiant, and I certify that I read said affidavit to said affiant, including all the words erased, and all the words added, and acquainted with its contents before he executed the same. I further certify that I am in nowise interested in said case, nor am I concerned in its prosecution; and that said affiant is personally known to me, and that he is a credible person.

P. H. Martin
Official Signature.

(L. S.)

Notary Public Brown Co Wis
Official Character.

I, S. S. Joyce clerk of the ~~County~~ Circuit Court in and for aforesaid County and State, do certify that R.H. Martin Esq. who hath signed his name to the foregoing declaration and affidavit, was at the time of so doing a Notary Public in and for said County and State duly commissioned and sworn; that all his official acts are entitled to full faith and credit, and that his signature thereunto is genuine.

Witness my hand and seal of office, this 29 day of October 1897.

S. S. Joyce

[L. S.]

Clerk of the Circuit Court Brown County
by Wm Handeyside deputy Clerk

This affidavit may be sworn to before any officer authorized to administer oaths. If executed before a Notary or Justice, however, the certificate of Clerk of Court should be attached, showing official capacity of said Notary or Justice, if such certificate be not already on file.

ADDITIONAL EVIDENCE.

CLAIM OF

Clemence Hontele Wid.
Pierre " "

Late " in Co. K " 34th Reg't.
of Wis. Inf. Vols.

Character of Claim.

Widows Pension

No 653,276

FILED BY
J. B. Cralle & Co.,
Pension Attorneys,
CRALLE BUILDING,
108 C Street, N. W.,
WASHINGTON, D. C.

Circuit Court Brown County

Peter Haute
vs
Plaintiff
Mary Theresia Haute
Defendant

The complaint of the above named plaintiff respectfully shows to the Court

That on the 2nd day of June 1856 at the Town of Green Bay in said County of Brown in the State of Wisconsin the plaintiff was married to the defendant. That ever since the said marriage the said plaintiff and defendant have been and still are residents of the State of Wisconsin except as hereinafter more especially mentioned That the plaintiff and the defendant were at the commission of the several acts of adultery hereinafter mentioned residents of this State. That on or about the 25th day of April 1871 in the City of Green Bay in the said County of Brown in the State of Wisconsin, the defendant committed adultery with one Joseph Haute That at divers times subsequently thereto the defendant again committed adultery at the City of Green Bay aforesaid with the said Joseph Haute and that ever since the said 25th day of April 1871 the said defendant has been living in adulterous intercourse with said Joseph Haute at said City of Green Bay and in divers other places

That since the said divers acts of adultery as aforesaid and before the commencement of this action to wit on or about the 15 day of Sept 1871 the said deft Mary Theresia Haute left the said City of Green Bay with the said Joseph Haute and as this plaintiff is informed and believes now lives in adulterous intercourse with each other.

That such adultery was committed without the consent connivance, privity, or procurement of the plaintiff that one year has not elapsed since the commencement of such adulterous intercourse was discovered by the plaintiff, and that since the discovery of the last act of adultery the plaintiff has not voluntarily cohabited with the defendant since such discovery except as follows That

U.S. PENSION OFFICE APR 2 1897

LAW DIVISION APR 20 1897 RECEIVED.

after the commission of the act of adultery committed on, or about the 25th day of April 1871 the plaintiff forgave the said adulterous act and again cohabited with the defendant on her promise to live a virtuous life in future but that shortly after said condonation the said defendant again committed adultery with said Joseph Haute and eloped with him and that since the plaintiff has not cohabited with said defendant That there are no issue of the said marriage of the plaintiff and defendant

Wherefore the plaintiff demands judgment that the bonds of matrimony between himself & the defendant be dissolved.

Hudd & Wigman
Attys for Plff

State of Wisconsin }
County of Brown } ss. Peter Haute being duly sworn says that he is the plaintiff in this action that he has heard read the foregoing complaint that he knows the contents thereof and that the same is true to his own knowledge except as to matters therein stated on information & belief and as to those matters he believes it to be true

Subscribed & sworn to
before me this 3d day of
October 1871
J H M Wigman
Notary Public Wis

Peter his x mark Haute

Circuit Court, County of Brown

Peter Haute
Pltff
against
Mary Theresia Haute
Deft

County of Brown ss. J H M Wigman one of the plaintiffs' attorneys in this action being duly sworn, says that no copy of an answer or demurrer to the complaint in this action, hereunto annexed, has been received, nor has any notice of retainer been served therein, by or on behalf of the said defendant.

Sworn to before me this 18
day of December 1871
John J. Tracy
Notary Public Bro. Co. Wis

J H M Wigman

PENSION OFFICE U.S. C APR 29 1897

LAW DIVISION RECEIVED APR 30 1897

At the General term of the Circuit Court begun and holden at the Court House in the City of Green Bay, in the County of Brown, and State of Wisconsin, begun on the 2nd Monday of December, AD, 1871

Present Hon E. H. Ellis Judge

Brown County Circuit Court.

Peter Haute
Plaintiff
vs
Mary Theresia Haute
Defendant

On reading and filing due proof of due service of the summons in this action on the defendant therein more than twenty days before this day, that the defendant Mary Theresia Haute has failed to answer or demur to the complaint or to appear in this action

On motion of Hudd & Wigman, Attorneys for the plaintiff, it is ordered by the Court now here that it be referred to A. H. Kellogg of Green Bay Wisconsin, as Referee to take proof of the facts and circumstances stated in said complaint, and to report such proofs and examinations, to this Court, with all convenient speed.

Dated December 18th 1871.

By the Court.
E. H. Ellis
Judge

U.S. PENSION OFFICE
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APR 29 1897

LAW DIVISION
RECEIVED
APR 30 1897

Brown Co Circuit Court

Peter Haute

vs

Mary Theresia Haute

Order of Reference

Hudd & Wigman

Plffs attys

Circuit Court Brown County

Peter Haute

Plaintiff

vs

Mary Theresia Haute

Defendant

Testimony taken in the above entitled action in pursuance of the annexed order of Reference bearing date 18th day of December 1871 before me A. H. Kellogg Referee at my office in the City of Green Bay Brown County State of Wisconsin commencing at of said day

State of Wisconsin
Brown County } ss

Peter Haute being duly sworn on oath deposes and says I am the plaintiff in this action the defendant is my wife we were married on the second day of June 1856 at the Town of Green Bay Brown County State of Wisconsin ever since said marriage have always resided in the State of Wisconsin in Brown County that on or about the 25th day of April 1871 in the City of Green Bay in said County I was living on Cherry Street Coming home one night I found the defendant in bed with Joseph Haute that at several times subsequent to the said 25th day of April 1871 the defendant left my house in Green Bay & went to the Belgian Settlement imme-diately after she was gone the said Joseph Haute followed her & stayed with her sometimes for one sometimes for more days they both stayed at the same house when they were out there. At several times prior to the 25th day of April 1871 I have caught the defendant and said Haute in one and same bed that said adulterous intercourse

RECEIVED APR 30 1897 DIVISION

DIVISION APR 29 1897

has been going on for the last three years or more, that on said 25th day of April 1871, I had had arrested as well as the said Joseph Haute for adultery & they were both bound over to appear before the Circuit Court and were indicted or informed against for said adultery that at her request and on her promise of good behaviour in the future I did not appear and did not prosecute her that sometime during the month of September 1871, she left Green Bay as she said to go to the Belgian settlement she did not go there and the said Joseph Haute left Green Bay at or about the same time with the defendant and as I am inform and believe went to the State of Michigan where they still reside in an adulterous intercourse with each other as I am informed that said adultery was committed without the consent or connivance or privity or procurement of the plaintiff that I have not cohabited with the defendant at any time since the 25th day of April 1871 that there is no children by the said marriage.

Subscribed & sworn
to before me this 18th day
of December 1871
A H Kellogg, Referee

Peter his x mark Haute

State of Wisconsin
County of Brown } ss. James S Brown being duly sworn on oath deposes & says I know both the plaintiff & the defendant. The plaintiff called upon me on or about the 25th day of April 1871 he wanted me to go to his house he thought his wife was in bed with his brother I was one of the Police officers of the City of

Green Bay Brown County Wisconsin. I went in to the house where they were living on Cherry Street in the City of Green Bay Brown County, Wis and found the defendant in bed with Joseph Haute both occupying one and the same bed Phillip Franks was with me we made them get up they went down into the bar room while in the bar room I saw Joseph Haute and the defendant kissing each other. The next day or soon there after the defendant and the said Joseph Haute were examined before Justice C. H. Kies of Green Bay Brown County Wis on the charge of adultery and bound over for their appearance in the Circuit Court

Subscribed & sworn to
before me this 22d day
of January 1872
A H Kellogg Referee

Jas. C. Brown

State of Wisconsin
Brown County } ss. I the Referee to whom the above action was referred do hereby certify that the above testimony was taken before me at my office in the City of Green Bay, Brown County Wis on the above named days, that the same was reduced to writing by me and that said witnesses before their testifying as aforesaid and before their said examinations were duly sworn to testify the truth the whole truth and nothing but the truth in relation to said cause that their said testimony was carefully read to them and to each of them respectively & then subscribed by each of them all of which is hereby most respectfully submitted.

Dated the 22d day of January 1872. A. H. Kellogg
Referee

LAW DIVISION APR 30 1897 RECEIVED

PENSION OFFICE 29

And afterwards to wit on the 24th day of January 1872 again appeared before me the above named plaintiff and upon his oath said that the condonation mentioned in the complaint was that after I had commenced and instituted criminal proceedings against the said plff and the said Joseph Haute on her promise of good behavior in the future I did not prosecute the said proceedings for said crime of adultery that immediately afterwards she went to the Belgian Settlement and occasionally the said Joseph Haute went out to visit her while there and at one time after the said condonation I saw them both going away when they came back on being interrogated she admitted to me that she had slept with the said Joseph Haute in a hay loft in Bay Settlement after that I caught her and the said Joseph Haute twice in one and the same bed on Cherry Street in the City of Green Bay, Brown County Wis I threatened again to prosecute her for adultery she then informed me that she did not care for she loved the said Joseph Haute better than she did me and she would go with him any way as often as she wished she said to me at different times that she would go away with Joseph Haute to some distant place sometime before she left Joseph Haute told me that he would go away with my wife to some distant place where I could not trouble them when she left she told me she was going to the Belgian Settlement but she did not go there I am informed she is in the State of Michigan with the said Joseph Haute they are living together and keeping saloon All the said acts of adultery to wit twice on Cherry Street where I saw them in one and the same bed were after the said condonation as aforesaid when they continued said acts of adultery I was informed that she got in the house and the said Joseph Haute climbed on the wood shed and then got into her room through the back window I did not see him go in only I saw them in bed together at both times I however noticed the places where he got in there are no children by our said marriage

Subscribed & sworn
to before this 24th day
of January 1872
A H Kellogg Referee

his
Peter X Haute
mark

All of which is respectfully submitted
A. H. Kellogg Referee

PENSION U.S. OFFICE
APR 29 1897

LAW DIVISION
APR 30 1897
RECEIVED.

State of Wisconsin
Circuit Court for Brown County

Peter Haute
Plaintiff
vs
Mary Theresia Haute
Defendant

Special
January Term
1872.

This action having been brought on to be heard upon the complaint herein and upon proof of defendants failure to answer and upon the report of A. H. Kellogg duly appointed referee in this action from which it appears that all the material facts alleged in the complaint are true and that the defendant Mary Theresia Haute has been guilty of the acts of adultery charged in the said complaint on motion of Hudd & Wigman attorneys for the plaintiff it is adjudged that the marriage between said Plaintiff Peter Haute and the defendant Mary Theresia Haute be dissolved and the same is hereby dissolved accordingly and the said parties are and each of them is freed from the obligations thereof.

Dated the 27th Day of January 1872

By the Court
E. H. Ellis
Judge

PENSION OFFICE
U. S.
C.
APR 29 1897

LAW DIVISION
APR 30 1897

Circuit Court
Brown County

Peter Haute
vs
Mary Theresia Haute

Decree

Filed in Open Court
Jany 27. 1872
J. B. A Masse
Clerk Cir Ct

Hudd & Wigman
Plffs attys

LAW DIVISION
APR
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1897
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GENERAL AFFIDAVIT.

☞This blank can be used for affidavit of **ONE WITNESS**, or for **TWO WITNESSES** having knowledge of the same facts.

State of Michigan County of Menominee, ss:

In the matter of Clemence Houle, Widow of Pierre Houle late a Private in Co. H of the 34th Reg't of Wis Inft Vols., for

On this first day of Aug, A. D., 1898, personally appeared before me, a Notary Public in and for the aforesaid County, duly authorized to administer oaths, John Dupont, aged 56 years, a resident of Nadeau in the County of Menominee and State of Michigan, whose Postoffice address is Nadeau Michigan.

and Nora Dupont aged 49 years a resident of Nadeau in the County of Menominee and State of Michigan whose Postoffice address is Nadeau Mich. and well known to me to be reputable and entitled to credit, and who, being duly sworn, declared in relation to aforesaid case as follows:

That they have been well and personally acquainted with Pierre Houle for 42 years, and 27 years, respectively and that from their Personal Knowledge through so many years and from being neighbors "we know that Pierre Houle was not married to any other Person except Mary Therese Miller Divorced and Mrs Clemence Accoin who was formerly Mrs Charlier and who is now the widow of the said Pierre Houle we also know that should Pierre Houle have been married to other than the Persons above mentioned that we must have known of the fact as we knew him so long and so intimately and saw him frequently during this time in fact every week or so and at times every day"

U. S. PENSION OFFICE A AUG 26 1898

Sol. P. M. only one.

✓

and they further declare that they have no interest in said case and are not concerned in its prosecution.

Eli Dupont — John Dupont

Ruth Garrigan — Mary her X Dupont mark

If either affiant signs by mark, two persons who write sign here. — Signatures of Affiants.

State of Michigan, County of Menominee, ss:

Sworn to and subscribed before me this 1st day of Aug, A. D. 1898, by the above-named affiant , and I certify that I read said affidavit to said affiant , including all the words ~~Michael Greenwood~~ erased, and all the words Therese Miller and Clemence Haute added, and acquainted them with its contents before they executed the same. I further certify that I am in nowise interested in said case, nor am I concerned in its prosecution; and that said affiants are personally known to me, and that they are credible persons.

Peter Garrigan
Official Signature.

Notary Public
Official Character.

(L. S.)

NOTE.—This can be executed before any officer authorized to administer oaths for general purposes.

☞ Affiants should state their means of knowledge of the facts to which they testify, and should draw their pen through all the unused lines on this blank.

ADDITIONAL EVIDENCE.

CLAIM OF

Clemence Haute widow of
Pierre Haute

Late in Co. H 34 Reg't.
of Wis Inf Vols.

Character of Claim.

Widows Gen'l Law and
Act No June 27. 90

603276.

FILED BY
J. B. Cralle & Co.,
Pension Attorneys,
CRALLE BUILDING,
108 C Street, N. W.,
WASHINGTON, D. C.

GENERAL AFFIDAVIT.

☞This blank can be used for affidavit of **ONE WITNESS**, or for **TWO WITNESSES** having knowledge of the same facts.

State of Wisconsin County of Kewaunee, ss:

In the matter of Clemence Hautz widow of Pierre Hautz

late a Private in Co. H of the 34

Reg't of Wisc Inf. Vols., for

On this 23rd day of July, A. D., 1898, personally appeared before me, a ~~[illegible]~~ Notary public in and for the aforesaid County, duly authorized to administer oaths, Prosper Hallet, aged 41 years, a resident of Darbellay in the County of Kewaunee and State of Wisconsin, whose Postoffice address is Darbellay, Kewaunee county Wis. and Maximilien Hallet aged 45 years a resident of Darbellay in the County of Kewaunee and State of Wisconsin whose Postoffice address is Darbellay Kewaunee Co. Wis and well known to me to be reputable and entitled to credit, and who, being duly sworn, declared in relation to aforesaid case as follows:

That they have been well and personally acquainted with Jean Baptiste Charlier for five years, and five years, respectively and that he died in Belgium on the last part of June 1868, the above is well known to us as we were neighbors within ten rods distance from the said Jean Baptiste Charlier and Clemence his wife.

The above testimony was all written by Joseph Wery by our oral statements and further swear that we are not interested directly or indirectly in the prosecution of said Claim

PENSION OFFICE AUG 25 1898

P. M. o. Clmt.
L. O. P. W. H

further declare*s* that *we have* no interest in said case *we are* not concerned in its prosecution.

Prosper Hallet

Mo Hallet

If either affiant signs by mark, two persons who write sign here.

Signatures of Affiants.

State of *Wisconsin*, County of *Kewaunee*, ss:

Sworn to and subscribed before me this *23rd* day of *July*, A. D. 189*8*, by the above-named affiant , and I certify that I read said affidavit to said affiant , including all the words *Prosper Hallet* erased, and all the words *Notary public* added, and acquainted *them* with its contents before *they* executed the same. I further certify that I am in nowise interested in said case, nor am I concerned in its prosecution; and that said affiant *are* personally known to me, and that *they are* credible person.

Joseph Stry
Official Signature.

(L. S.)

Notary public
Official Character.

NOTE.—This can be executed before any officer authorized to administer oaths for general purposes.

☞ Affiants should state their means of knowledge of the facts to which they testify, and should draw their pen through all the unused lines on this blank.

ADDITIONAL EVIDENCE.

CLAIM OF

Late ...... in Co. ...... Reg't.

of ...... Vols.

Character of Claim.

No.

FILED BY
J. B. Cralle & Co.,
Pension Attorneys,
CRALLE BUILDING,
108 C Street, N. W.,
WASHINGTON, D. C.

GENERAL AFFIDAVIT

State of Michigan, **County of** Menominee

In the matter of Clemence Haute widow of Pierce Haute late a Private in Co. "C" of the 34 Reg't of Wisc. Inft. Vols., for Widows Pension

On this 22 day of June, A. D., 1897, personally appeared before me, a Notary Public in and for the aforesaid County, duly authorized to administer oaths, Louis Augustin, aged 40 years, a resident of Nathan & John Straik aged 38 years a resident of Nathan in the County of Menominee and State of Michigan, whose Postoffice address is Nathan Mich. and well known to me to be reputable and entitled to credit, and who, being duly sworn, declared in relation to aforesaid case as follows:

(Affiant should state his means of knowing the facts to which he testifies.)

I Louis Augustin and I John Straik Do hereby testify & Swear that We have known Mrs Clemence Haute since the death of Her husband Pierre Haute on may 7th 1891 continuously, that We know from our own Personal observation that the said Mrs Clemence Haute has never been married to any other Person since the death of the said Pierre Haute as aforesaid.

Subscribed & Sworn to before me this 22nd day of Jun A.D. 1897
Peter Carrigan
Notary Public

Louis Augustin
John Straik

PETER CARRIGAN NOTARY PUBLIC CARNEY, MICHIGAN

We do further declare that We have no interest in said case and are not concerned in its prosecution.

If affiant signs by mark, two persons who can write sign here.

Louis Augustin
John Straik
Signature of Affiant.

No marr

No sengs

State of Michigan County of Menominee, ss:

Sworn to and subscribed before me this 22 day of June, A. D. 1897, by the above-named affiant , and I certify that I read said affidavit to said affiant , including all the words erased, and all the words added, and acquainted them with its contents before they executed the same. I further certify that I am in nowise interested in said case, nor am I concerned in its prosecution; and that said affiants are personally known to me, and that they are credible persons

Peter Garrigan
Official Signature.

(L. S.)

Notary Public
Official Character.

Peter Garrigan, Notary Public, Carney, Michigan.

I, clerk of the County Court in and for aforesaid County and State, do certify that Esq. who hath signed his name to the foregoing declaration and affidavit, was at the time of so doing in and for said County and State duly commissioned and sworn; that all his official acts are entitled to full faith and credit, and that his signature thereunto is genuine.

Witness my hand and seal of office, this day of 189 .

[L. S.] Clerk of the

This affidavit may be sworn to before any officer authorized to administer oaths. If executed before a Notary or Justice, however, the certificate of Clerk of Court should be attached, showing official capacity of said Notary or Justice, if such certificate be not already on file.

ADDITIONAL EVIDENCE.

CLAIM OF

Clemence Houte Wid.
of Pierre Houte

Late Co. C in 34th Reg't.
of Wis Inft Vols.

Character of Claim.

Widow's Pension

No 653,276.

PENSION JUL 27 1897 U. S. OFFICE.

FILED BY
J. B. Cralle & Co.,
Pension Attorneys,
CRALLE BUILDING,
108 C Street, N. W.,
WASHINGTON, D. C.

State of Michigan County of Menominee
In the Matter of Clemence Haute Widow of
Pierre Haute Late a Private in Co H of the 34th
Regt. of Wis Infty Vols., for Widows Pension.
On this 21 day of Aug AD 1897 Personally
appeared before me a notary Public in and for
the aforesaid county, duly authorized to administer
oaths John Dupont aged 55 years Resident
of Nadeau Mich Menominee Co. and Nora
Dupont of Nadeau Menominee Co Mich aged 48 years Whose
Post office adress is Nadeau Mich and
Well Known to me to be reputable and Entitled
to credit; and Who being duly sworn in relation
to aforesaid case as follows. To Wit says.
I John Dupont & I Nora Dupont Have Known
Mrs Clemence Haute since here arrival
in this country in the Year
AD 1870 and have Known her continuously
every since said date and Know that she
has not been Married since her arrival in
this country previous to, or to any other man
than the said Pierre Haute all of this we
Know from acquaintance and Personal observation
with and of the said Clemence Haute during
the Period mentioned
and We do further declare that We have
no interest in said case and are not Concerned
in its Prosecution

Witnessed By
Peter Garrigan
Eli Dupont

John Dupont (seal)
Nora Dupont (seal)

No P.M. [illegible]
back to [illegible]

No prior mge, after 1870 ✓

PENSION
SEP 11 1897
U. S.
OFFICE.

State of Michigan County of Menominee, SS:
Sworn to & Subscribed before me this 21st day of Aug A.D 1897 by the above named affiants and I certify that I read the said affidavit to said including all the words erased and all the Words added and acquainted them with the contents before they Executed the same I further Certify that I am in no wayse interested in said case, nor am I concerned in its Prosecution; and that said affiants are Personally known to me and that they are reputable and creditable Persons.

Peter Garrigan
Notary Public.

Claim of
Clemence Haute
Widow of
Pierre Haute
"H" - 34" Wisc. Inf.
for
Widow's Pension
No. 653.276.

Filed by
J. T. Cralle & Co.
Washington,
D.C.

STATE OF WISCONSIN,
County of Brown.
IN CIRCUIT COURT FOR BROWN COUNTY, } ss.

I, E E Joyce, Clerk of the Circuit Court, in and for the County of Brown in the State of Wisconsin, do hereby cetify that I have carefully compared the foregoing and annexed copy of Judgment & proceedings with the original now on file, and of record in my office, in a certain action wherein Peter Haute is Plaintiff, and Mary Theresia Haute is Defendant, and that the same is a true and correct transcript of said originals and of the whole thereof.

In Testimony Whereof, I have hereonto set my hand and affixed the Seal of said Court, at the Clerk's office, in the City of Green Bay, Wis., this 29th day of December A. D. One Thousand Eight Hundred an Ninety six

E E Joyce Clerk.

PENSION APR 9 1897

Circuit Court
Brown County

Peter Haute
Pltff
vs

Mary Theresia Haute
Deft

certified copy of
Judgment & proceedings

LAW DIVISION
APR
30
1897
RECEIVED.

Claim of
Clemence Hause
Widow of
Pierre Hause
Co H - 34 Reg
Wisc Inft Vols.
— for —
Widows Pension
Act of June 27/90.

Filed by
J. B. Cralle & Co
Washington D.C.

CLAIMANT'S AFFIDAVIT.

State of Michigan, **County of** Menominee

In the matter of Clemence Haute widow of Pierre Haute

late a Private in Co. H of the 34 Reg't of Wis Inf Vols., for

On this 15 day of June, A. D., 1898, personally appeared before me, a Notary Public in and for the aforesaid County, duly authorized to administer oaths, Clemence Haute, aged 56 years, a resident of Nathan in the County of Menominee and State of Mich, whose Postoffice address is Nathan Mich and well known to me to be reputable and entitled to credit, and who, being duly sworn, declares as follows:

That She is the claimant in the above-mentioned cause, and that for the reason that there is no Public record of the death of Her Husband Pierre Haute she can not give a copy thereof certified or otherwise

And further that she is the claimant in above cause & is concerned in its prosecution.

Julia Granberg
Ruth Garrigan
If affiant signs by mark, two persons who can write sign here.

Clemence her X mark Haute
Signature of Affiant.

PENSION
G
JUL
8
1898
U. S.
OFFICE.

Clmt
fur. as to Pub. Rec.

✓

State of Michigan, County of Menominee, ss:

Sworn to and subscribed before me this 15 day of June, A. D. 1898, by the above-named affiant, and I certify that I read said affidavit to said affiant, including all the words erased, and all the words added, and acquainted Her with its contents before She executed the same. I further certify that I am in nowise interested in said case, nor am I concerned in its prosecution; and that said affiant is personally known to me, and that she is a credible person.

Peter Garrigan
Official Signature.

(L. S.)

Notary Public
Official Character.

I, ______ clerk of the County Court in and for aforesaid County and State, do certify that ______ Esq. who hath signed his name to the foregoing declaration and affidavit, was at the time of so doing ______ in and for said County and State duly commissioned and sworn; that all his official acts are entitled to full faith and credit, and that his signature thereunto is genuine.

Witness my hand and seal of office, this ______ day of ______ 189 .

______

[L. S.] Clerk of the ______

This affidavit may be sworn to before any officer authorized to administer oaths. If executed before a Notary or Justice, however, the certificate of Clerk of Court should be attached, showing official capacity of said Notary or Justice, if such certificate be not already on file.

ADDITIONAL EVIDENCE.

CLAIM OF

______

Late ______ in Co. ______ Reg't.

of ______ Vols.

Character of Claim

Widow - Act of June 27 '90
General Law

No. 603.276

CLAIMANT'S AFFIDAVIT.

FILED BY

J. B. Cralle & Co.,
Pension Attorneys,
CRALLE BUILDING,
108 C Street, N. W.,
WASHINGTON, D. C.

Peter Garrigan

State of Michigan, } ss.
COUNTY OF MENOMINEE.

LAW DIVISION
APR
30
1897
RECEIVED.

I, Henry J Morsum *Clerk of the Circuit Court for the County and State aforesaid, do hereby certify that* Peter Garrigan *is a* ~~*Notary Public*~~ Justice of the Peace. *in and for said County duly Commissioned and qualified to act as such; that his Commission was dated on the* 4 *day of* July *A. D.* 1893 *and will expire on the* 4 *day of* July *A. D.* 1897 *and that his signature above written is genuine*

Given under my hand and the seal of said Court, at Menominee, in said County, on this 6th *day of* Nov *A. D.,* 1896

Henry J Morsum *Clerk.*

417889 Detroit

Increase & rating

(3-145)

INVALID PENSION.

Claimant, Pierre Harde

P.O., Bagley
County, Menominee
State, Michigan.

Rank, Pvt.
Company, A
Regiment, 34, Wis. Vol. Inf.

Sf. **Rate, $** 12 per month, commencing June 4, 1890

Disabled by Right inguinal hernia (complicated)

DROPPED FROM ROLLS
MAY 19 1896
PENSIONER DEAD

RECOGNIZED ATTORNEY:

Name, J. B. Cralle & Co. Fee $ 10, Agent to pay.
P.O., City Articles filed , 18 .

APPROVALS:

Submitted for Sept 26, 1890 Clements, Examiner.

Approved for right inguinal hernia. Re-rating rejected. No r ~~established~~

10. 2, 1890 Gallagher, ~~Legal Reviewer~~.

Approved for right inguinal hernia (complicated) 12/ from June 4th 1890 /18

O.E.

A. S. Allen M.E.

Oct. 7", 1890, Thos. S. Ingram, Medical Referee.

Discharged Sept 8, 1863 Last paid to , at $ 8
Pensioned from Feb. 11, 1888 at $ 8, for as above

Original declaration filed Feb. 11, 1888 alleged as above

Arrears allowed from , 18 , to , 18 , at $

PRESENT CLAIM.

Declaration filed Dec. 24, 1889, As pensioned.
" " July 9, 1889, " "

Files evidence

6-23

857 b—50 m

ca 491.236 Detroit

(3-[illegible]8 a.)

ACT OF JUNE 27, 1890.

WIDOW'S PENSION. No. 653,276, W.C.

Claimant Clemence Haute, Soldier Pierre Haute

P. O. Nathan, Rank Private, Co. H,

County Menominee, State Michigan, Regiment 34 Wis. Vol. Inf.,

H.S.

Rate, $8 per month, commencing April 29, 1897, and $2 per month additional for each child, as follows:

Born, , 18 . Sixteen, , 18 . Commencing , 18 .

Born, , 18 . Sixteen, , 18 . Commencing , 18 .

No Born, , 18 . Sixteen, , 18 . Commencing , 18 .

Children, Born, , 18 . Sixteen, , 18 . Commencing , 18 .

Born, , 18 . Sixteen, , 18 . Commencing , 18 .

Born, , 18 . Sixteen, , 18 . Commencing , 18 .

Born, , 18 . Sixteen, , 18 . Commencing , 18 .

Born, , 18 . Sixteen, , 18 . Commencing , 18 .

Payments on all former certificates covering any portion of same time to be deducted.

All pension to terminate , 189 , date of

Next.

RECOGNIZED ATTORNEY:

Name J. B. Cralle & Co., Fee $ 10.00 Agent to pay.

P. O. Washington, D.C. Articles Filed — —, 189

APPROVALS:

Submitted for admission Dec. 21, 1898, C. S. Harrison, Examiner.

Re- " " Adm. March 7 1900 Chas. M. Yeates

Approved for admission.

March 7, 1900. W. P. Wetherell, Legal Reviewer.

W Berger

The soldier was never pensioned at $12, per month for right inguinal hernia, (complicated.)

July 8/99 W

Mch 13/1900 December 6, 1862

Enlisted ~~November 24, 1862~~ Soldier's app'n filed February 11, 1888.

and honorably disch'd September 8, 1863, Clt's app'n under other laws July 10, 1897,

Re-enlisted no, 18 . Former marriage of soldier shown, 18 .

" " "claimant " ,

honorably disch'd no. 18 . Death of former husband June, 1868,

Divorce fr. " wife January 27, 1872,

Died May 7, 1896, Clt's marriage to soldier March 25, 1872

Declaration filed April 29, 1897, Cl't not remarried , 18 .

Claimant is without other means of support than her daily labor.

0-4

Signed by "mark". No M. C.

Instructions.

The Affiant should write in his own handwriting these facts following:

1. Length of time he has been practicing medicine.

2. Whether, or not, he knew the soldier *before enlistment*. If he did know him, *for how long a period* he *knew* him, *how intimately*, and what his opinion is as to said soldier's soundness at enlistment; adding, if true, that he was sound, and *particularly* that he was *free from the disability on which he claims pension*, *or any tendency thereto*.

3. If he treated the soldier *during his enlistment*, either as his regimental surgeon or while he may have been at home on furlough, he will state his physical condition at such times, the nature and duration of his disability, and the dates of treatment.

4. Whether he has treated said soldier *since* his *discharge*. If he has, he should state—

(1) At about what date he first treated him.

(2) What his physical condition was when he first treated him, giving a full description or diagnosis of his disability.

(3) Period during which he has treated him, *giving approximate dates* where exact dates cannot be given, and if dates of prescriptions or visits cannot be given, he should state why.

5. **Very Important.**—He will also state what has been THE DEGREE of claimant's incapacity for manual labor, by reason of the disabilities on which his claim is based, *during each month or year* of the period of his treatment; in other words, what has been the *average loss of time from labor*, per month or year, or about what proportion of a sound able-bodied man's work he has been able to perform, whether ½, ¼, ⅛, ⅓, ⅔, ¾, or as the case may have been.

IMPORTANT.—The affidavit of the Physician must conform to the instructions contained in the margin, or it will not be considered by the Pension Office as satisfactory. Therefore, he should read said instructions very carefully before undertaking to prepare this Affidavit, and then embody in his statement all the facts known to him. Let the diagnosis be so full and complete that a medical man can at once unmistakably recognize the diseases, wounds, or injuries, even though they be not technically named. Where the disability is the sequel of a wound received, injury incurred, or disease contracted in the service, the pathological connection between them must be clearly and fully set forth, together with the reasons upon which he bases his conclusions.

STATE OF Wisconsin }
COUNTY OF Dodge } *ss:*

In the pension claim of Pierre Haute, (Name of Claimant.) late (private) member of 34 Wisconsin Infft Regiment (Company and Regiment, or Vessel, or other organization or department.)

Personally came before me, a Notary Public (Justice of the Peace, Notary Public, or Clerk of Court, as the case may be.) in and for aforesaid County and State, Theodore Knoff (Name of Physician or Surgeon.), a resident of Beaverdam city (City or Village.) of the County of Dodge, State of Wisconsin, who, being duly sworn, declares in relation to the aforesaid case as follows: (Here follow closely instructions in the margin. If space be not sufficient, the Physician should firmly attach a sheet of paper to this blank, and continue his statement.)

I have been acquainted with Pierre Haute as private of the 34th Wiscon Infft Regiment during the time of about of nine months, had often talk with him and other from the men of his Comp in broken french. He got injured as I remember distinctly sometimes in June the last part of it I think in 1863 near Memphis Tennessee on the Picket line, falling over some obstacle wood or a stump which I forgot, on the road and in darkness. He was carried to the Hospital tent, towards morning, I was called out to attend to him; He a very stout man, complained of nausea and pains in the scrotal region. Examination showed an established hernia inguinalis, the right of the scrotal division and the right testicle were painfull and inflamed, the hernia inguinalis of the right side seemed to descend to the testicle. F Taxis performed truss applied he remained in comparative ease for about a month in and around the Hospital, he could do not more heavy work or any other long duty of any consequence during the time of his service.

F Hernia found on [illegible] was found at that time.

And he further declares that he has no interest in said case, and is not concerned in its prosecution.

Theo. Knoff late [illegible] 34 Wis[illegible]
(Signature of Physician or Surgeon. If ever in the Army, give rank and service.)

THE PHYSICIAN IN FILLING THIS BLANK SHOULD NOT REFER TO THE MARGINAL INSTRUCTIONS BY NUMBERS, BUT SHOULD WRITE HIS STATEMENT IN NARRATIVE FORM.

This Blank is prepared by GEORGE E. LEMON, of Washington, D. C., and is Exclusively for his use.

Sworn to and subscribed before me this day; and I hereby certify that the affiant is a practicing physician in good professional standing; that I am in nowise interested, either directly or indirectly, in th prosecution of this claim; and that I read the foregoing affidavit to the affiant, and acquainted him of its contents before he executed the same.

Seal on file

Witness my hand and official seal this Third day of May 1888

[L. S.]

CHAS. C. MILLER

Sign here Chas C Miller Notary Public Dodge Co Wis
(Justice, Notary, or Clerk of Court, as the case may be

THE OFFICER BEFORE WHOM THIS AFFIDAVIT IS EXECUTED MUST BE SURE AND NOTE IN HIS CERTIFICATE ALL ERASURES AND INTERLINEATIONS WHICH MAY BE MADE IN THE BODY OF THE AFFIDAVIT.

READ.—It is preferable that this instrument should be executed before a Clerk of Court. The seal should be impressed on the original paper, either direct or through the paper on which the jurat is made, if that be a separate paper. When executed before a Justice of the Peace or Notary Public, a certificate from the Clerk of the Court must be attached, certifying that the Justice of the Peace or Notary Public had authority to act as such, except in cases where the Justice of the Peace or Notary Public has filed his commission, or certified copy thereof, in the Office of the Commissioner of Pensions.

STATE OF ____________
COUNTY OF ____________ } *ss:*

I, ____________ (Name of Clerk of Court.), Clerk of the County Court in and for aforesaid County and State, do certify that ____________ (Justice of the Peace or Notary Public.), Esq., who hath signed his name to the foregoing jurat, was at the time of so doing a ____________ (Justice the Peace or Notary Public.) in and for said County and State, duly commissioned and sworn; that all his official acts are entitled to full faith and credit, and that his signature thereto is genuine.

Witness my hand and seal of office this ________ day of ____________, 188

[L. S.]

____

Clerk of the ____________

Western DIVISION.

No. 639.645

MEDICAL EVIDENCE.

Theodore Kopff MD

CLAIM OF

Pierre Haute

FOR

Pvt Co H 34 Mo Vol

WESTERN. RECEIVED. MAY 22 1888

U.S. PENSION OFFICE MAY 19 1888

FILED BY
GEORGE E. LEMON,
Attorney and Counsellor at Law.
Offices, No. 615 Fifteenth Street N. W.,
P. O. Lock Box 325. WASHINGTON, D. C

☞ As this may reach the hands of some persons unacquainted with this House, we append hereto, as specimens of the testimonials in our possession, copies of letters from several gentlemen of political and military distinction and widely known throughout the United States:

HOUSE OF REPRESENTATIVES,
WASHINGTON, D. C., *March* 1, 1879.

We, the undersigned, having an acquaintance with Captain GEORGE E. LEMON for the past few years, and a knowledge of the systematic manner in which he conducts his extensive business, and of his reliability for fair and honorable dealing connected therewith, cheerfully commend him to claimants generally.

A. V. RICE,
Chairman, Committee on Invalid Pensions, House Reps.
W. F. SLEMONS, Member of Congress,
Second Congressional District of Ark.
W. P. LYNDE, Member of Congress,
Fourth Congressional District of Wis.
R. W. TOWNSHEND, Member of Congress,
Nineteenth Congressional District of Ill.

BELVIDERE, ILLINOIS, *October* 24, 1875.

I take great pleasure in recommending Captain GEORGE E. LEMON, now of Washington, D. C., to all persons who may have claims to settle or other business to prosecute before the Departments at Washington. I know him to be thoroughly qualified, well acquainted with the laws and with Department rules in all matters growing out of the late War, especially in the Paymaster's and Quartermaster's offices. I have had occasion to employ him for friends of mine, also, in the soliciting of patents, and have found him very active, well informed, and successful. As a gallant officer during the war, and an honorable and successful practitioner, I recommend him strongly to all who may need his services.

S. A. HURLBUT, Member of Congress,
Fourth Congressional District, Illinois,
Late Major-General U. S. Vols.

HOUSE OF REPRESENTATIVES, WASHINGTON, D. C.,
March 3, 1875.

From several years' acquaintance with Captain GEORGE E. LEMON, of this city, I cheerfully commend him as a gentleman of integrity and worth, and well qualified to attend to the collection of bounty and other claims against the Government. His experience in that line gives him superior advantages.

W. P. SPRAGUE, Member of Congress,
Fifteenth Congressional District of Ohio.
JAS. D. STRAWBRIDGE, Member of Congress,
Thirteenth Congressional District of Penn.

EXECUTIVE MANSION, BOISE CITY,
IDAHO TERRITORY, *September* 5, 1876.

Captain GEORGE E. LEMON, Attorney and Agent for the collection of war claims at Washington City, is a thorough, able, and exceedingly well-informed man of business, of high character, and entirely responsible. I can assure all having war claims requiring adjustment that their interests cannot be confided to safer hands.

M. BRAYMAN,
Governor of Idaho and late Maj.-Gen. Vols.

☞ Any person desiring information as to my standing and responsibility will, on request, be furnished with a satisfactory reference in his vicinity or Congressional District.

Dis. Record
Doubtful.

AFFIDAVIT TO ORIGIN OF DISABILITY.

To be executed by an officer or enlisted man of the soldier's company and regiment having personal knowledge of the circumstances under which the disability was incurred on account of which pension is claimed.

Before Filling in this Affidavit the Witness should read carefully the Marginal Instructions, and conform thereto in every particular as far as his knowledge of the facts will allow. Enlisted Men's evidence will not be accepted if an Officer's can be had.

State of Wisconsin }
County of Brown } ss:

In the matter of the Pension claim of Pierre Haute Priv, Co. H, 34th Reg't Wisc Vols., personally came before me, a Justice of the Peace (Title of officer administering oath.) in and for the aforesaid County and State, Leonard La Plante, of The, County of Brown, State of Wisconsin, who, being duly sworn, declares in relation to the aforesaid claim that his age is 54 years; that he is the identical person who served as a Second Lieutenant in Co. H, 34 Reg't Wisconsin Vols, and knows the above soldier, who was a member of Co. H, 34 Reg't Wisconsin Vols; that on or about July day of, 1863, while in the line of duty, and without fault or improper conduct on his part, at or near Memphis, State of Tennessee said soldier incurred disability that prevented him from doing duty for some time and he was treated for said disability by the Regimental Surgeon. At the time said disability was incurred said soldier was on Picket duty. in the night time and being dark stumbled and fell over a stump or some obstruction causing a rupture near the groin on the right side. He did not show it to me but told me about it at the time

I saw said soldier at the date of or immediately previous to discharge and he was yet suffering with the same disability that he incurred as above

The Soldier was in sound bodily health and especialy free from the disability for which pension is claimed, at the time he enlisted and immediately preceeding the date of incurring his disability for which he claims pension To the best of my knowledge and belief

State the nature of the wound or injury received, and in what part of the body located; or the name and nature of the disease or disability incurred.
State what caused the disability, and upon what particular duty the soldier was engaged at the time it was incurred. If on special duty, by whose order was he acting?
If the injury was a rupture, be particular to state its location, and whether you saw it at the time of or immediately after its incurrence, or at any time while in the service.
State whether you saw him at the date of or immediately previous to discharge; also when, where, and whether the disability named then existed.
State whether the soldier was in sound bodily health and especially free from the disabilities upon which claim for pension is based, at the time he enlisted and immediately preceding the date of incurring his disabilities.
State your source of information, whether present at time and place and an eye-witness to the facts related. If in command of company when the disability was incurred, so state.

Affiant further declares that he has no interest, direct or indirect, in this claim, and that he makes the above statement from personal knowledge from the fact that he was present at the time and place and saw said soldier disabled as above

Affiant's Post-Office address is as follows: Wequiock Brown Co. Wis

☞ Two persons who write their names MUST sign here as witnesses to affiant's signature, if he signs by mark.

L'e grold le coope
(Name of one witness.)
Peter Morrison
(Name of other witness.)

L. La Plante

☞ PREPARE YOUR STATEMENT ON A SEPARATE SHEET OF PAPER, CORRECT IT CAREFULLY, AND THEN TRANSFER IT TO THIS BLANK. ☜

This Blank is prepared by GEORGE E. LEMON, of Washington, D. C., and is Exclusively for his Use.

SWORN TO AND SUBSCRIBED before me this 17th day of March 1888; and I hereby certify that the contents of the foregoing affidavit were fully made known and explained by me to the affiant before swearing thereto, including the words

(If any words have been erased in this affidavit, enter them here.)

erased, and the words

(If any words have been added in place of any erased, enter them here.)

added: that the affiant is to me well known and entitled to credit; and I further certify that I have no interest, direct or indirect, in the prosecution of this claim.

[L. S.]

Peter Morrison
(Name of officer before whom executed.)
Justice of the Peace
Brown Co. Wis.
(State whether Justice, Notary, Clerk, or Deputy Clerk.)

☞ THE OFFICER BEFORE WHOM THIS AFFIDAVIT IS EXECUTED MUST BE SURE AND NOTE IN HIS CERTIFICATE ALL ERASURES AND INTERLINEATIONS, AS INDICATED ABOVE.

READ.—It is preferable that this instrument should be executed before a Clerk of Court. The seal should be impressed on the original paper either direct or through the paper on which the jurat is made, if that be a separate paper. When executed before a Justice of the Peace or Notary Public, a certificate from the Clerk of the Court must be attached, certifying that the Justice of the Peace or Notary Public had authority to act as such except in cases where the Justice of the Peace or Notary Public has filed his commission, or certified copy thereof, in the Office of the Commissioner of Pensions.

I certify that Peter Morrison (Justice or Notary's name.) before whom the above affidavit was made, is a Justice of the Peace (Justice of the Peace or Notary Public.) duly authorized to administer oaths, and that the above is his signature.

IN WITNESS WHEREOF I have hereunto set my hand and official seal this Nineteenth day of March, 1888.

[L. S.]

Aug. Boland.
(Name of the Clerk or Deputy Clerk.)

Clerk of the Circuit Court Brown Co. Wis.
(Name of what Court.)

West DIVISION.

Affidavit of Commissioned Officer or Comrade.

Additional Evidence.

No 639645

Original
(Character of claim.)

Pierre Hault
(Name of claimant.)

Late (Rank.), Co. H, 34 Regl., Wis. Vols.

AFFIDAVIT OF

(Name of Affiant.)

Late (Rank.), Co., Regl., Vols.

FILED BY
GEORGE E. LEMON,
ATTORNEY AND COUNSELLOR AT LAW,
OFFICES, 615 FIFTEENTH STREET N. W.,
P. O. DRAWER 325. WASHINGTON, D. C.

U. S. PENSION OFFICE MAR 30 1888

WESTERN APR 2

(3—111.)

☞ Attention is invited to the outlines of the human skeleton and figure upon the back of this certificate, and they should be used whenever it is possible to indicate precisely the location of a disease or injury, the entrance and exit of a missile, an amputation, etc.

The absence of a member from a session of a board and the reason therefor, if known, and the name of the absentee, must be indorsed upon each certificate.

Insert character† and number of claim. Original Pension Claim No. 639,645.

Name and rank of claimant. Pierre Haute, Rank, Private.

Company H, 34 Reg't Wis. Inf. | Marinette, Wis. State, (Post office address of the Board.)

Claimant's post office address. Bagley, Mich. | June 20th, 1888. (Date of examination.)

We hereby certify that in compliance with the requirements of the law* we have carefully examined this applicant, who states that he is suffering from the following disability, incurred in the service, viz:

Cause of disability. Hernia of right side.

If a pensioner, fill in the amount; if not, erase the whole line. ~~and that he receives a pension of dollars per month.~~

Pulse rate per minute, 84; respiration, 18; temperature, 98 1/2; height, 5 feet 5 inches; weight, 160 pounds; age, 62 years.

He makes the following statement upon which he bases his claim for† original.

Here give the claimant's statement as briefly and as compactly as possible. He fell & hurt himself while on picket duty at Memphis, Tenn, & the rupture is a result of the fall. Was hurt July 20th 1863 & was mustered out in Aug. 1863. He is unable to wear a truss.

Upon examination we find the following objective conditions: An oblique complete inguino-scrotal hernia. The tumor is one inch in diameter & 3 1/2 inches long; it passes through the the external abdominal ring. The hernia can be easily reduced & we think if a properly constructed truss were worn it could be retained. The parts appear to be quite tender & the claimant says that he is unable to wear a truss.

Here give a full symptom picture of the case, embracing all the physical and rational signs, but confining it to the *present* condition of the claimant.

It must be borne in mind that the duty of the Surgeon is to give an opinion as to the proportionate degree of disability, as ½, ¼, total, &c., through the grades, *without any regard to dollars and cents*, and to make such a full particular description as will afford to this Office the ground for intelligent opinion and action in rating.

From the existing condition and the history of this claimant, as stated by himself, it is, in our judgment, ______ probable that the disability was incurred in the service as he claims, and that it has not been prolonged or aggravated by vicious habits. He is, in our opinion, entitled to a 8/18 of 3rd rating for the disability caused by hernia of right side, for that caused by ______, and ______ caused by ______

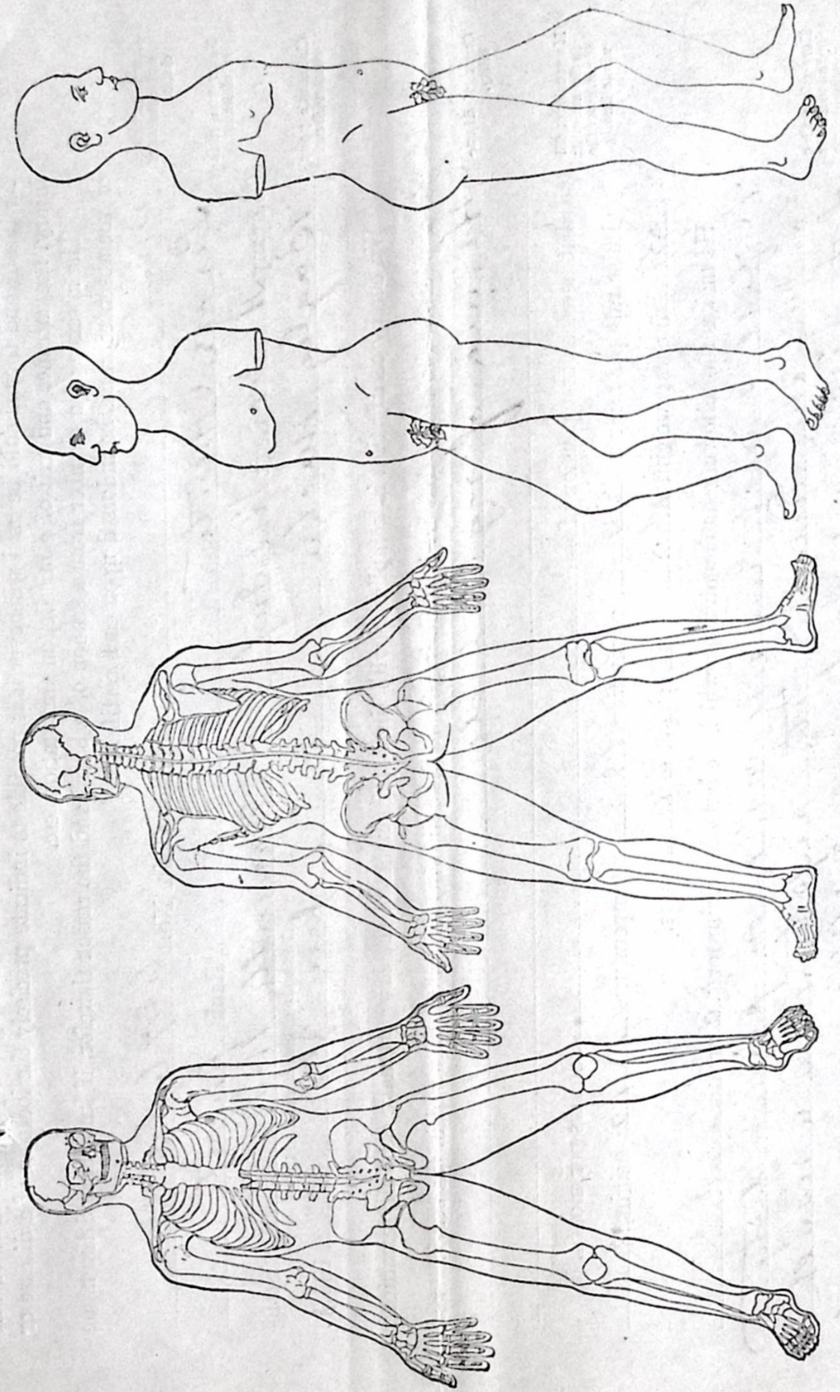
Rate for each cause of disability. If prolonged by vicious habits, the word *not* should be erased and the reason for the erasure given.

*See the back.
† Here state whether for original, increase, restoration, or renewal, or for a re-rating.

absent, Pres. F Gregory, Sec'y. J. H. Mc[illegible], Treas.

N. B.—Always forward a certificate of examination whether a disability is found to exist or not.

(8262—100,000.)



Single surgeons will use this blank, changing "we" to read "I," and "our" to read "my." They will erase the words "Pres.," "Sec'y," "Treas.," and "Board" where the words appear, and sign at the foot of the certificate, and also on the back of the same.

U.S. PENSION OFFICE

SURGEON'S CERTIFICATE

IN CASE OF

Pierre Haute,

Co. H, 34th Reg't Wis. Vol.

Applicant for original.

No. 639,645.

DATE OF EXAMINATION:

June 20th, 1888.

absent, *Pres.,*
F. Gregory, *Sec'y,*
J. H. Mullen, *Treas.,*
BOARD.

JUL 2 1888

Post office, Marinette,

County, Marinette,

State, Wisconsin.

P. S. Write your Post-Office address plainly and in full.

We do not know the cause of Dr. O'Keef's absence today!
F. Gregory
Secy.

PROVIDED FURTHER, That all examinations shall be thorough and searching, and the certificate contain a full description of the physical condition of the claimant at the time, which shall include all the physical and rational signs and a statement of all the structural changes. [*Extract from Section 4, Act of Congress approved July 25, 1882.*]

(3—111.)

☞ Attention is invited to the outline of the human skeleton and figure upon the back of this certificate, and they should be used whenever it is possible to indicate precisely the location of a disease or injury, the entrance and exit of a missile, an amputation, etc.

The absence of a member from a session of a board and the reason therefor, if known, and the name of the absentee, must be indorsed upon each certificate.

Insert character† and number of claim. Increase, Pension Claim No. 417 889

Name and rank of claimant. Pierre Houtz, Rank, Private

Company H, 34 Reg't Wis. Inf. | Marinette, Wisconsin State, (Post office address of the Board.)

Claimant's post office address. Bagley, Menominee Co. Mich. | June 4, 1890. (Date of examination.)

We hereby certify that in compliance with the requirements of the law* we have carefully examined this applicant, who states that he is suffering from the following disability, incurred in the service, viz:

Cause of disability. Right inguinal Hernia

If a pensioner, fill in the amount; if not, erase the whole line. and that he receives a pension of Eight dollars per month.

Pulse rate per minute, 78; respiration, 22; temperature, 97; height, 5 feet 6 inches; weight, 150 pounds; age, 63 years.

He makes the following statement upon which he bases his claim for† Increase.

Here give the claimant's statement as briefly and as compactly as possible. Because he cannot take care of himself or earn his living on account of rupture growing worse.

Upon examination we find the following objective conditions: Direct Inguinal Hernia, Reducibable, Cannot be retained by truss, ~~tumor~~ tumor at exit from ring about 2 inches in diameter, decends into scrotum filling it up to the size of mans fist. Abdominal ring about 2 inches in diameter, relaxed

Here give a full symptom picture of the case, embracing all the physical and rational signs, but confining it to the *present* condition of the claimant.

It must be borne in mind that the duty of the Surgeon is to give an opinion as to the proportionate degree of disability, as ½, ¼, total, &c., through the grades, *without any regard to dollars and cents*, and to make such a full particular description as will afford to this Office the ground for intelligent opinion and action in rating.

From the existing condition and the history of this claimant, as stated by himself, it is, in our judgment, Quite probable that the disability was incurred in the service as he claims, and that it has not been prolonged or aggravated by vicious habits. He is, in our opinion, entitled to a 12/18 rating for the disability caused by Right ~~inguinal~~ Hernia ~~left side~~, for that caused by, and caused by

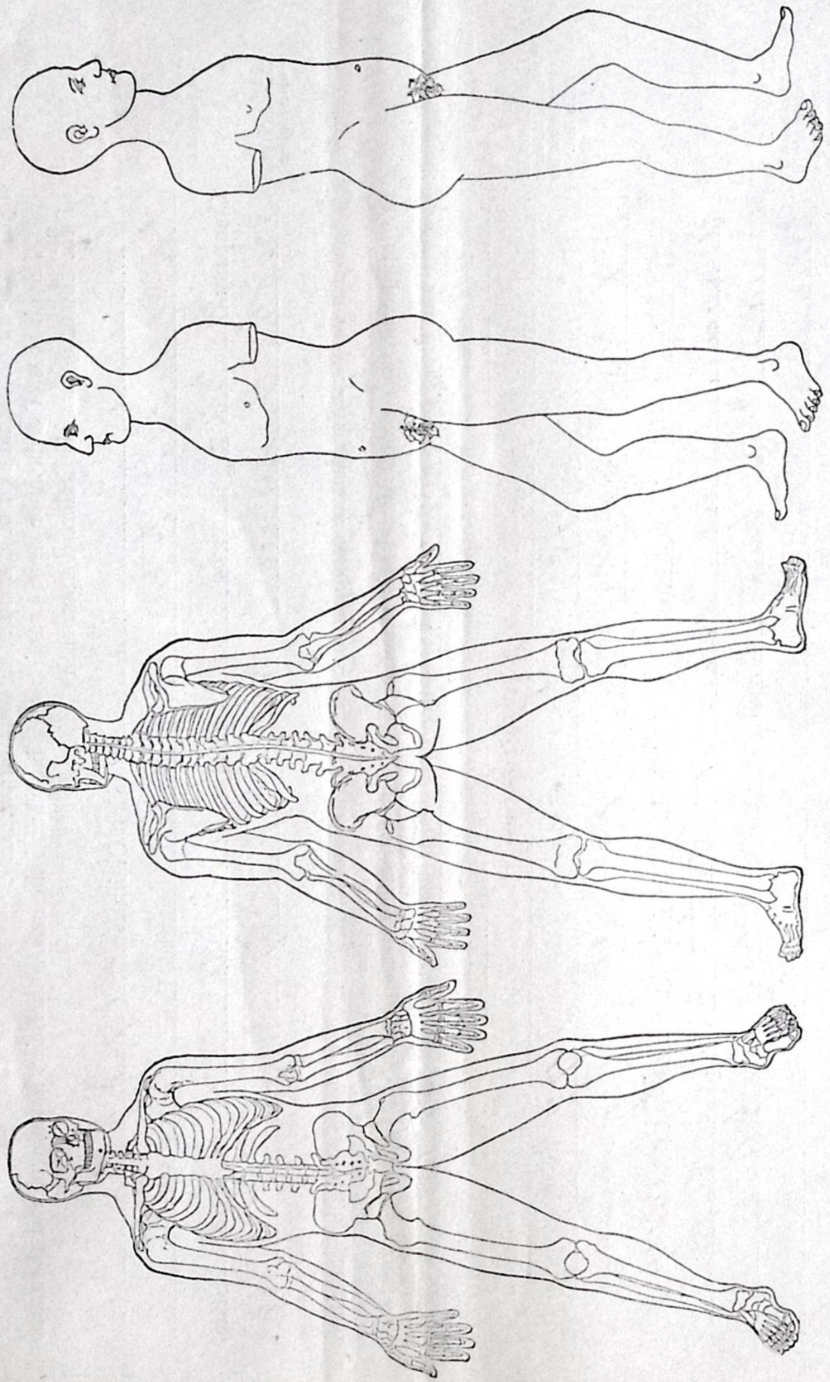
Rate for *each* cause of disability. If prolonged by vicious habits, the word *not* should be erased and the reason for the erasure given.

* See the back.
† Here state whether for original, increase, restoration, or renewal, or for a re-rating.

, Pres. H. C. Gibbs, Sec'y. L. C. Jones, Treas.

N. B.—Always forward a certificate of examination whether a disability is found to exist or not.

6—127



PENSION OFFICE U.S. 1890

Single surgeons will use this blank, changing "we" to read "I," and "our" to read "my." They will erase the words "Pres.," "Sec'y," "Treas.," and "Board" where the words appear, and sign at the foot of the certificate, and also on the back of the same.

SURGEON'S CERTIFICATE

IN CASE OF

Pierre Houte

Co. H., 34 Reg't Wis. Inf

Applicant for Increase

No. 417 889

DATE OF EXAMINATION:

June 4th, 1890.

B. T. Phillips, *Pres.*,
H. C. Sibree, *Sec'y*,
S. P. Jones, *Treas.*,
BOARD.

Post office, Marinette

County, Marinette

State, Wisconsin

P. S.--Write your Post-office address plainly and in full.

PROVIDED FURTHER, That all examinations shall be thorough and searching, and the certificate contain a full description of the physical condition of the claimant at the time, which shall include all the physical and rational signs and a statement of all the structural changes. [*Extract from Section 4, Act of Congress approved July 25, 1882.*]

MMB

2

(3—111.)

☞ Attention is invited to the outlines of the human skeleton and figure upon the back of this certificate, and they should be used whenever it is possible to indicate precisely the location of a disease or injury, the entrance and exit of a missile, an amputation, &c.

The absence of a member from a session of a board and the reason therefor, if known, and the name of the absentee, must be indorsed upon each certificate.

Insert character and number of claim.

Increase [State above whether for original, increase, or restoration.] Pension Claim No. 417887

Name and rank of claimant.

Pierre Haute, Rank, Pvt

Company H, 34 Reg't Wis Inf

Menominee Mich State, [Post-office address of the Board.]

Claimant's post-office address.

Bagley Mich

Dec 21, 1892 [Date of examination.]

We hereby certify that in compliance with the requirements of the law we have carefully examined this applicant, who states that he is suffering from the following disability, incurred in the service, viz: Right inguinal hernia. disease of spine. stomach and kidneys

Cause of disability.

If a pensioner, fill in the amount; if not, erase the whole line.

and that he receives a pension of twelve dollars per month.

He makes the following statement upon which he bases his claim for Increase [Original, increase, restoration, &c.]

Here give the claimant's statement as briefly and as compactly as possible.

I want increase of pension because I have trouble of the heart and stomach

Upon examination we find the following objective conditions: Pulse rate, 90; respiration, 22; temperature, 98½; height, 5 feet 5 inches; weight, 140 pounds; age, 67 years. Right inguinal hernia, We find a right scrotal hernia length of tumor extending into scrotum six inches. diameter three inches. Could be reduced and kept in place by a proper truss. abdominal ring relaxed and two inches in diameter. We believe claimant entitled to a rating of ten dollars a month for disability caused by hernia passing through external ring. We find no evidence of disease of spine. We find no cause for rating for disease of the spine We find slight tenderness over region of the stomach. We believe him entitled to a rating of two dollars a month for disease of stomach. We find no evidence of disease of kidneys. Urine normal in color and constituents, no abnormal deposits. We find no cause for a rating for disease of kidneys

(except as above we find no cause for disability

Here give a full description of the disabilities, in accordance with Book of Instructions.

He is, in our opinion, entitled to a 10/18 rating for the disability caused by Hernia, 2/18 for that caused by disease of stomach, and for that caused by

Rate for *EACH* cause of disability.

R. T. Phillips, Pres. John F Hicks, Sec'y. L. P. Jones, Treas.

N. B.—Always forward a certificate of examination whether a disability is found to exist or not.

(227—300,000.) 6—552

U. S. PENSION OFFICE
JAN 7 1893
B U

SURGEON'S CERTIFICATE

IN CASE OF

Pierre Houte

Co. H, 34 Reg't Wis Inf

Applicant for Pension claim

No. 417887

DATE OF EXAMINATION:

Dec 21, 1892

B. T. Phillips, Pres.,
Wm T Hicks, Sec'y, BOARD.
S. P. Jones, Treas.,

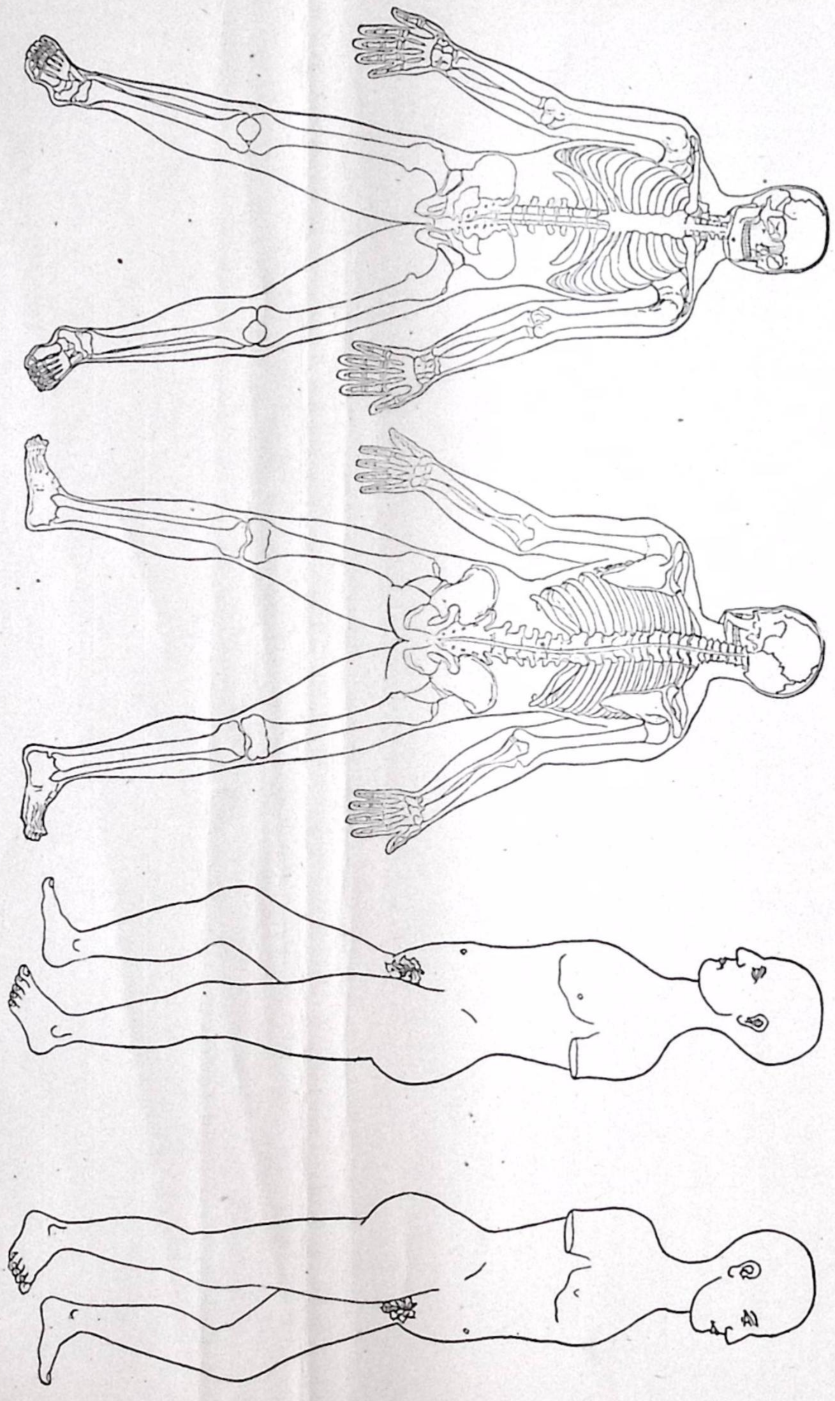
Post office, Menominee

County, Menominee

State, Michigan

P. S.—Write your Post-office address plainly and in full.

Harling.



Single surgeons will use this blank, changing "we" to read "I," and "our" to read "my." They will erase the words "Pres.," "Sec'y," "Treas.," and "Board" where the words appear, and sign at the foot of the certificate, and also on the back of the same.

PROVIDED FURTHER, That all examinations shall be thorough and searching, and the certificate contain a full description of the physical condition of the claimant at the time, which shall include all the physical and rational signs and a statement of all the structural changes. [*Extract from Section 4, Act of Congress approved July 25, 1882.*]

6—682

Continue record of examination here.

639.645

War Department,

ADJUTANT GENERAL'S OFFICE,

Washington, Sept 21, 1888.

Respectfully returned to the Commissioner of Pensions.

Theodore Kopff, a Asst. Surgeon of ~~Company~~, 34th Regiment Wisconsin Volunteers, ~~was enrolled on the day of , 186 , at , and~~ is reported: on roll of F & S for May & June /63, present – He was mustered out with F & S Sept. 8th /63, at Milwaukee, Wis – Leonard Laplante, 2d Lieut. and John Collins & Francis Bertrand, Privates Co. H, same Organization, are reported on roll May & June /63, present – They were mustered out with Co. Sept. 8th /63, at Milwaukee, Wis – Station June 30th /63, Near Memphis, Tenn.

Rolls July & Aug., and Return July 63 are not on file.

C.R.B.
W.L.

R. C. DRUM,
Adjutant General.

By

o 3-019.

(2.)

Po

(3—061.) L.B.

S. Western Division.

Adjutant General's O.
RECEIVED
JUL .. 1888
ENLISTED
Volunteer Pension Br.

Department of the Interior,

BUREAU OF PENSIONS,

July 6, 1888.

Respectfully requested of the ADJUTANT GENERAL U. S. A. *a report from the records of his Office as to the presence or absence, on or about* July 20, 1863 *of* Theodore Kopff, A. Surg., L. La Plante, Lt. and John Collins and Frank Bertram, Privates *of* Co. H, 34th Wis. Infy *and the station, at that date, of the* Command.

Claim No. 639645

Pierre Haute, H, 34th Wis. Inf.

John C. Black
Commissioner.

386/10

WESTERN
TO EXAMINER
SEP 1888

WESTERN
SEP 24 1888

PENSION OFFICE
SEP 21 1888

AFFIDAVIT TO ORIGIN OF DISABILITY.

To be executed by an officer or enlisted man of the soldier's company and regiment having personal knowledge of the circumstances under which the disability was incurred on account of which pension is claimed.

Before Filling in this Affidavit the Witness should read carefully the Marginal Instructions, and conform thereto in every particular as far as his knowledge of the facts will allow. Enlisted Men's evidence will not be accepted if an Officer's can be had.

State of Wisconsin }
County of Kewaunee } ss:

In the matter of the Pension claim of Pierre Haute, Co. H, 34 Reg't Wisconsin Vols., personally came before me, a Notary Public (Title of officer administering oath.) in and for the aforesaid County and State, John Collin and Frank Bertrant, of the Town of Green Bay County of Brown, of the Town of Luxemburg, County of Kewaunee, State of Wisconsin who, being duly sworn, declares in relation to the aforesaid claim that his age is their age: 60 49 years; that he is they are the identical persons who served as a Private in Co. H, 34th Reg't Wisconsin Vols., and knows the above soldier, who was a member of Co. H, 34th Reg't Wisconsin; that on or about twentieth 20th day of July 1863, while in the line of duty, and without fault or improper conduct on his part, at or near Memphis, State of Tennessee, said soldier incurred A Rupture by falling across a stump in the night while on Picket duty between 12 and 2 O Clock A. M. in the morning and was laid up for about a month under the Care of the Regimental doctor before he done duty again still he often complaint afterward of having pain in the private on account of said fall he was treated by the regimental doctor right after his fall We dont remember the name of the doctor as we could not speak English at that time we have heard it said that the doctor is dead now

We saw his Injuries at the time of his accident on his breast and Stomach but we did not look below his Stomach at the time nor after but we remember he often Complaint of it afterward to us.

State the nature of the wound or injury received, and in what part of the body located; or the name and nature of the disease or disability incurred.

State what caused the disability, and upon what particular duty the soldier was engaged at the time it was incurred. If on special duty, by whose order was he acting?

If the injury was a rupture, be particular to state its location, and whether you saw it at the time of or immediately after its incurrence, or at any time while in the service.

State whether you saw him at the date of or immediately previous to discharge; also when, where, and whether the disability named then existed.

State whether the soldier was in sound bodily health and especially free from the disabilities upon which claim for pension is based, at the time he enlisted and immediately preceding the date of incurring his disabilities.

State your source of information, whether present at time and place and an eye-witness to the facts related. If in command of company when the disability was incurred, so state.

Affiant further declares that he has no interest, direct or indirect, in this claim, and that he makes the above statement from personal knowledge of their own

Affiant's Post-Office address is as follows:

☞ Two persons who write their names MUST sign here as witnesses to affiant's signature, if he signs by mark.

T. B. Hendricks
(Name of one witness.)

P. Haevers
(Name of other witness.)

Jean Collin

Frank his X mark Bertrant

☞ PREPARE YOUR STATEMENT ON A SEPARATE SHEET OF PAPER, CORRECT IT CAREFULLY, AND THEN TRANSFER IT TO THIS BLANK. ☜

This Blank is prepared by GEORGE E. LEMON, of Washington, D. C. and is Exclusively for his Use.

SWORN TO AND SUBSCRIBED before me this 28th day of November 1887; and I hereby certify that the contents of the foregoing affidavit were fully made known and explained by me to the affiant before swearing thereto, including the words (John Callin Resides in Brown Co, Wis, and H. Bertrand in Kewaunee Co) (Wis) (If any words have been erased in this affidavit, enter them here.) erased, and the words (If any words have been added in place of any erased, enter them here.) added; that the affiant ~~is~~ are to me well known and entitled to credit; and I further certify that I have no interest, direct or indirect, in the prosecution of this claim.

[L. S.]

F. Haevers
(Name of officer before whom executed.)
Notary Public
(State whether Justice, Notary, Clerk, or Deputy Clerk.)

THE OFFICER BEFORE WHOM THIS AFFIDAVIT IS EXECUTED MUST BE SURE AND NOTE IN HIS CERTIFICATE ALL ERASURES AND INTERLINEATIONS, AS INDICATED ABOVE.

READ.—It is preferable that this instrument should be executed before a Clerk of Court. The seal should be impressed on the original paper, either direct or through the paper on which the jurat is made, if that be a separate paper. When executed before a Justice of the Peace or Notary Public, a certificate from the Clerk of the Court must be attached, certifying that the Justice of the Peace or Notary Public had authority to act as such; except in cases where the Justice of the Peace or Notary Public has filed his commission, or certified copy thereof, in the Office of the Commissioner of Pensions.

I certify that F. Haevers (Justice or Notary's name) before whom the above affidavit was made, is a Notary Public (Justice of the Peace or Notary Public) duly authorized to administer oaths, and that the above is his signature.

IN WITNESS WHEREOF I have hereunto set my hand and official seal this 5th day of December 1887.

[L. S.]

Thomas Hlawacek
(Name of the Clerk or Deputy Clerk.)
Clerk of the of the Circuit Court
(Name of what Court.)

Western DIVISION.
Affidavit of Commissioned Officer or Comrade.

Additional Evidence.

No. 639.645.

Invalid
(Character of claim.)
Pierre Haute
(Name of claimant.)
Pvt Co. H. 34. Wisc

Late (Rank.), Co.
Regt., Vols.

AFFIDAVIT OF
(Name of Affiant.)

Late (Rank.), Co.
Regt., Vols.

WESTERN
RECEIVED
MAR 14 1888

MAR 13 1888
OF PENSIONS

FILED BY
GEORGE E. LEMON,
ATTORNEY AND COUNSELLOR AT LAW,
OFFICES, 615 FIFTEENTH STREET N. W.,
P. O. DRAWER 325. WASHINGTON, D. C.

3—060.

Western Div.

OWG Ex'r.

Wid. No. 653,276

Clemence Haute, wid. of

Pierre Haute

Co. H, 34 Wis. Inf.

RECORD & PENSION OFFICE

1547031

JAN 15

Department of the Interior,

BUREAU OF PENSIONS,

Washington, D. C., Jan. 13, 1898.

SIR:

For use in the above-entitled claim for pension you are requested to furnish this Bureau with a full military and medical history of Pierre Haute, who, it is alleged, enlisted —, 18 —, at —, as a Prvt. in Co. H, 34 Reg't, Wis. Inf., and was discharged —, 18 —, at —

It is also alleged that on or about ...., 18 ...., he was disabled by .... and was treated in hospitals as follows:

Very respectfully,

H. Clay Evans

Commissioner.

The Chief of the
RECORD AND PENSION OFFICE,
WAR DEPARTMENT.

3782b15m8-97

0-2

3–060.

No.

WAR DEPARTMENT,

RECORD AND PENSION OFFICE.

Respectfully returned to the Commissioner of Pensions.

Pierre Hault

Co. F 34 Reg't Wis Mil Inf

was enrolled Dec 6, 1862

and M O with Co Sept 8, 1863

as of Co H 34 Wis Inf to which transferred Dec 27 62

Not found as Pierre Haute

From Dec 6, 1862, *to* Sept 8, 1863

he held the rank of Private

and during that period the rolls show him present ~~except as follows:~~

Write nothing to the left of this line.

The medical records show him treated as follows:

No record found.

PENSION OFFICE
F
JAN 17 1898
U. S.

By authority of the Secretary of War:

F. C. Ainsworth

Colonel, U. S. Army.

Per m

Date JAN 15 1898

(COMMISSIONER OF PENSIONS.)

AUG 8 1892

(8-1-90-10m)

B. DECLARATION FOR THE INCREASE OF AN INVALID PENSION. B.

State of Wisconsin *County of* Florence *ss:*

On the date hereinafter mentioned, personally appeared before me, a Justice of the Peace (Title of Magistrate) within and for the County and State aforesaid Pierre Haute aged 67 years, a resident of Bagley County of Menominee State of Mich who being duly sworn according to law, declares that he is a pensioner of the United States, enrolled at the Detroit Pension Agency at the rate of 12 Dollars per month, Certificate No 417,887 by reason of disability from right inguinal hernia complicated, (Name the disabilities mentioned in pension certificate.) incurred in the Military service of the United States while serving as a Pvt Co H. 34th Wis Infy (State rank, company and regt. or vessel.)

That he believes himself to be entitled to an increase of pension on account of *too low rating for said disability* and greatly increased disability therefrom causing rupture of left side and disease of spine stomach and kidneys and causing total inability to perform any kind of labor. that he is in danger of sudden death by reason of the complication

(Here state particularly and fully the reason, or reasons, why an increase of rate or re-rating, or both, is claimed. Cite the law, if one is known, which especially applies to this case.)

He appoints Milo B. Stevens & Co., Pension Claim Attorneys, of ~~Cleveland, O.~~ Detroit Mich his true and lawful attorneys, with power of substitution, to present and prosecute his claim, requesting that, in the event of an allowance being made, his said attorneys be paid a fee, as provided by law.

His postoffice address is Bagley Menominee Co. Mich.

Pierre his X mark Haute
Signature of Claimant.

Also personally appeared Eugene Haute residing at Florence Wis, and J. Morso residing at Florence Wis, persons whom I certify to be respectable and entitled to credit, and who, being by me duly sworn, say that they were present and saw Pierre Haute the claimant, ~~sign his name~~ (make his mark) to the foregoing declaration; that they have every reason to believe, from the appearance of said claimant and their acquaintance with him, that he is the identical person he represents himself to be; and that they have no interest in the prosecution of this claim.

Eugene Haute
J. Morso
Signature of Witnesses.

If witnesses sign by mark, two persons who can write must sign here.

(SEE OTHER SIDE.

Inv. 92,

(FROM OTHER SIDE.)

SUBSCRIBED, SWORN TO AND ACKNOWLEDGED before me this 2nd day of August 1892 and I hereby certify that the contents of the above declaration and power of attorney were fully and truly made known and explained to the applicant and witnesses before swearing to the same; and that Pierre Haute, acknowledged the signing and sealing of the power of attorney to be his free act and deed for the purpose therein named. I further certify, that I have no interest, direct or indirect, in the prosecution of this claim.

[L. S.]

W. C. Haberkorn,
Signature of Magistrate.

Justice of the Peace Florence Co Wis
Official Title of Magistrate.

Magistrate notified
Dec. 14 1898
RECORD DIVISION

MA

NOTE—☞ This paper may be executed before any officer authorized to administer oaths for general purposes, but unless such officer uses an official seal, the certificate of the Clerk of the Court, certifying to his official character, must be attached thereto.

PENSION OFFICE
AUG 8 1892

13 [illegible]

INVALID
CLAIM FOR PENSION
OR INCREASE.

Pierre Haute Applicant.
Co. H "34 Reg't
Wis. Inft Vols.
No. of Pension Certificate 417889
Present Rate 12.00
Disability Rt. ing. hernia & comp.

FILLED BY
MILO B. STEVENS & CO.,
Pension Claim Attorneys,
~~CHICAGO, ILLS~~

DECLARATION FOR THE INCREASE OF AN INVALID PENSION.

State of Michigan }
County of Menominee } ss.

On this 16th day of December, A. D. one thousand eight hundred and eighty nine, personally appeared before me, James Champion a Justice of the Peace within and for the County and State aforesaid Pierre Haute aged 65 years, a resident of Bagley, County of Menominee, State of Mich., who, being duly sworn according to law, declares that he is a pensioner of the United States, duly enrolled at the Detroit, Mich. Pension Agency, at the rate of Eight dollars per month, by reason of disability incurred in the military (State whether military or naval.) service of the United States while serving as a (Give rank, company and regiment, or other organization, if in the Army; and rank and vessel, if in the Navy.) Private Co. "H" 34" Wis. Vols.

that his present physical condition is such that he believes himself entitled to receive an increased pension; and that his Pension Certificate is numbered 417889"

He further declares that he is disabled in the following manner, to wit: (Set forth your present disability, giving time when, place where and circumstances under which wounds were received or disease contracted.) Right inguinal hernia" which has become aggravated to an extent that prevents him from wearing any kind of a truss.

He hereby appoints, with full power of substitution and revocation,

GEORGE E. LEMON

of Washington, D. C., his true and lawful Attorney, to prosecute his claim; that his Post Office address is Bagley, Menominee Co. Mich. (Give Town, County, and State)

Pierre his X mark Houte
(Claimant's Signature.)

Dup

Two witnesses to Claimant's Signature sign here:

(1) John Longrie
(2) Joseph Gagne

Also personally appeared John Longrie, residing at Bagley, and Joseph Gagne, residing at Bagley, persons whom I certify to be respectable and entitled to credit, and who, being by me duly sworn, say they were present and saw Pierre Haute the claimant, sign his name (or make his mark) to the foregoing declaration; that they have every reason to believe, from the appearance of said claimant and their acquaintance with him, that he is the identical person he represents himself to be; and that they have no interest in the prosecution of this claim.

John Longrie
Joseph Gagne
(Signatures of Witnesses to identity of Applicant.)

Two attesting Witnesses to signatures by X mark

(1)
(2)

This blank is prepared by and is for the Exclusive use of GEORGE E. LEMON, of Washington, D. C

SWORN TO AND SUBSCRIBED before me this 16th day of December, A. D. 1889; and I hereby certify that the contents of the above declaration, &c., were fully made known and explained to the applicant and witnesses before swearing, including the words ______ (If any words have been erased in the application, enter them here.) ______, erased, and the words ______ (If any words have been added in place of any erased, enter them here.) ______, added; and that I have no interest, direct or indirect, in the prosecution of this claim.

[L. S.]

James Champion
(Signature.)

Justice of the Peace
(Official character.)

Certificate on file

☞ Applications for *Increased* pension may be acknowledged before a Justice of the Peace, Notary Public, or any officer having authority to administer oaths for general purposes; the official character of such officer must be certified by the Clerk of Court, under the seal thereof.

DEC 24 1889
OFFICE

INVALID.

CLAIM FOR PENSION.

INCREASE.

Pierre Haute Applicant,

Priv. Co., "H" 34" Reg't,

Wisc. Vols.

No. of Pension Certificate 417889

NO SUB AGENT.

FILED BY
GEORGE E. LEMON,
Attorney and Counsellor at Law,
Offices 615 Fifteenth St. N. W.,
P. O. Lock Box 325. WASHINGTON, D. C.

☞ As this may reach the hands of some persons unacquainted with this House, we append hereto, as specimens of the testimonials in our possession, copies of letters from gentlemen of political and military distinction and widely known throughout the United States:

U. S. SENATE CHAMBER,
WASHINGTON, D. C., July 8, 1884.

GEORGE E. LEMON, Esq., Washington, D. C.

MY DEAR SIR: Before leaving for home I desire to express to you my high appreciation of the methods used in your business office, resulting as they do in a degree of efficiency that gives to your clients a prompt, careful, and successful management of their personal interests. This is due to the many excellent qualities that distinguish you as a man, and I am glad of the opportunity to assure you of my high esteem.

Very truly, yours, CHARLES F. MANDERSON, U. S. S.

We regard GEORGE E. LEMON, of this city, as a competent and reliable ttorney in pension cases.
JOHN F. MILLER, U. S. S.
JOHN J. INGALLS, U. S. S.

HOUSE OF REPRESENTATIVES,
WASHINGTON, D. C., July 3, 1884.

I take pleasure in recommending GEORGE E. LEMON, of this city, as a reliable attorney and worthy lawyer, to whom claimants can entrust their business with assurances that it will be well and honestly attended to.
L. E. ATKINSON, M. C., 18th Pa. District.

GEORGE E. LEMON, Esq.:

I have never had any trouble with pension or other claims prosecuted by your firm, and have uniformly commended you to my soldier constituents and others. JOHN S. ROBINSON, M. C., 9th Ohio District.

I take pleasure in recommending GEORGE E. LEMON, of this city, as a reliable attorney, and I should be glad to remember him to the soldiers of my district. T. J. WOOD, M. C., 10th Ind. District.

I believe that GEORGE E. LEMON, of this city, is a competent and reliable attorney in pension cases, and one who stands well with the Commissioner of Pensions and Department. B. W. PERKINS, M. C., Kansas.

I have known something of the manner in which Mr. GEORGE E. LEMON, of this city, has conducted his business. I have found him an efficient, attentive, and trustworthy attorney. A. X. PARKER, M. C., 19th Dist., N. Y.

I take pleasure in recommending Mr. GEORGE E. LEMON, of this city, as a lawyer of good reputation for skill and reliability.
B. M. CUTCHEON, M. C., 9th Dist., Mich.

Attention is also invited to the following from other members of Congress:

HOUSE OF REPRESENTATIVES,
WASHINGTON, D. C., July 3, 1884.

We take pleasure in recommending GEORGE E. LEMON, of this city, as a reliable attorney.

W. S. ROSECRANS, 1st Dist., Cal.
JAMES LAIRD, 2d Dist., Neb.
J. G. CANNON, 15th Dist., Ill.
GEO. R. DAVIS, 3d Dist., Ill.
J. H. BAGLEY, JR., 15th Dist., N. Y.
H. H. BINGHAM, 1st Dist., Pa.
J. C. S. BLACKBURN, 7th Dist., Ky.
C. A. BOUTELLE, at large, Me.
THOS. H. BRENTS, Washington Ter.
J. H. BREWER, 2d Dist., N. J.
J. O. BROADHEAD, 9th Dist., Mo.
T. M. BROWNE, 6th Dist., Ind.
HUGH BUCHANAN, 4th Dist., Ga.
J. N. BURNES, 4th Dist., Mo.
W. H. CALKINS, 13th Dist., Ind.
J. F. CLAY, 2d Dist., Ky.
POINDEXTER DUNN, 1st Dist., Ark.
N. B. ELDREDGE, 2d Dist., Mich.
T. M. FERRELL, 1st Dist., N. J.
J. F. FINERTY, 2d Dist., Ill.
J. F. FOLLETT, 1st Dist., Ohio.
E. H. FUNSTON, 2d Dist., Kan.
G. W. GEDDES, 14th Dist., Ohio.
D. B. HENDERSON, 3d Dist., Iowa.
B. F. HOWEY, 4th Dist., N. J.
ELZA S. JEFFORDS, 3d Dist., Miss.
B. W. JONES, 3d Dist., Wis.
J. A. KASSON, 7th Dist., Iowa.
W. P. KELLOGG, 3d Dist., La.
J. H. KETCHAM, 13th Dist., N. Y.
G. V. LAWRENCE, 24th Dist., Pa.
BENJ. LEFEVRE, 4th Dist., Ohio.
H. B. LOVERING, 6th Dist., Mass.
J. W. McCORMICK, 11th Dist., Ohio.
BENTON McMILLIN, 4th Dist., Tenn.
EUSTACE GIBSON, 4th Dist., W. Va.
WM. DORSHEIMER, 7th Dist., N. Y.
R. Q. MILLS, 9th Dist., Texas.
C. H. MORGAN, 12th Dist., Mo.
E. N. MORRILL, at large, Kan.
W. C. OATES, 3d Dist., Ala.
CHAS. O'NEILL, 2d Dist., Pa.
D. R. PAIGE, 20th Dist., Ohio.
L. P. POLAND, 2d Dist., Vt.
J. R. RAYMOND, Dakota.
J. M. RIGGS, 12th Dist., Ill.
W. E. ROBINSON, 2d Dist., N. Y.
O. R. SINGLETON, 5th Dist., Miss.
CHAS. STEWART, 1st Dist., Texas.
J. B. STORM, 11th Dist., Pa.,
I. S. STRUBLE, 11th Dist., Iowa.
J. R. THOMAS, 20th Dist., Ill.
J. R. TUCKER, 6th Dist., Va.
J. H. WALLACE, Ohio.
MILO WHITE, 1st Dist., Minn.
W. L. WILSON, 2d Dist., W. Va.
E. B. WINANS, 6th Dist., Mich.
H. S. VAN EATON, 6th Dist., Miss.
P. V. DEUSTER, 4th Dist., Wis.
D. W. CONNOLLY, 12th Dist., Pa.
A. H. PETTIBONE, 1st Dist., Tenn.
JAS. C. NICHOLLS, 1st Dist., Ga.
GEORGE W. RAY, 21st Dist., N. Y.
W. D. HILL, 6th Dist., Ohio.
S. W. MOULTON, 17th Dist., Ill.
A. J. HOLMES, 10th Dist., Iowa.
J. D. TAYLOR, 17th Dist., Ohio.
M. L. CLARDY, 10th Dist., Mo.
J. E. O'HARA, 2d Dist., N. C.
H. G. BURLEIGH, 17th Dist., N. Y.
E. S. LACEY, 8th Dist., Mich.
S. L. MILLIKEN, at large, Me.
S. H. MILLER, 26th Dist., Pa.
J. J. KLEINER, 1st Dist., Ind.

I request Postal Stamps for Replies and for Return of Papers.

FOR RE-RATING AND INCREASE OF INVALID PENSION.

STATE OF Michigan
COUNTY OF Menominee } *SS:*

On this 11th day of July A. D., 1889, personally appeared before me a Justice of the Peace within and for the County and State aforesaid Pierre Houle
(Claimant's name should be written here.)
aged 64 years, a resident of the County of Menominee State of Michigan who being duly sworn, according to law, deposes as follows, to wit·

I am a pensioner of the United States, duly enrolled at the Detroit pension agency, at the rate of eight dollars per month, by reason of disability incurred in the military service of the United States, while a member of Company H of the 34 Regiment of Wisconsin Volunteers, and my present physical condition is such that I believe I am entitled to receive an increase of pension. I am pensioned for "Right inguinal hernia"

[State here the disability or disabilities for which you are pensioned, just as they are written in your Pension Certificate.]

That my disability has resulted in Total inability to do any manual labor and is getting steadily worse.

[If your disability has resulted in any other disability, please write the same here.]

I also claim re-rating of my pension from the date of the original granting of the same, upon the ground that the rate allowed me has not been adequate to the degree of disability existing, or in proportion to amounts received by others for disabilities of the same character, or those equivalent in extent.

IT IS WITH FULL POWER OF SUBSTITUTION THAT I HEREBY APPOINT J. B. CRALLE, OF WASHINGTON, D. C., my true and lawful Attorney to prosecute my claim. My Postoffice address is Bagley County of Menominee State of Michigan and the number of my certificate is 417,889

Attest two witnesses. { Joe Jerue
Joe Legault

Pierre his X mark Houle
[Claimant's Signature.]

Also personally appeared Joe Jerue and Joe Legault residing at Bagley persons whom I certify to be respectable and entitled to credit, and who being duly sworn say that they were present and saw Pierre Houle the claimant sign ~~his name~~ (or make his mark) to the foregoing declaration, and that they have every reason to believe from the appearance of said claimant, and from their acquaintance with him, that he is the identical person he represents himself to be, and they have no interest, direct or indirect, in the prosecution of this claim.

Signature of Witnesses. { Joe Jerue
Joe Legault

Sworn to and subscribed before me this 11th day of July A. D., 1889.

and I hereby certify that the contents of the above declaration, etc., were fully made known and explained to the applicant and witnesses before swearing, including the words ———— erased, and the words ———— added; and that I have no interest, direct or indirect, in the prosecution of this claim.

James Champion
(Signature.)
Justice of the Peace
(Official Character.)

Inc. 89.

(C.)

INVALID CLAIM
FOR
PENSION
INCREASE
AND
RE-RATING.

Pierre Houle Applicant.

H Co. 34" Reg't.

Wisconsin Infantry Volunteers.

Certificate No. 41791

PENSION OFFICE
JUL 19 1889

FILED BY

J. B. CRALLE,

Claimant's Attorney,

WASHINGTON, D. C.

RESULTING DISABILITIES.

CHRONIC DIARRHŒA may result in disease of kidneys, rheumatism, disease of heart, disease of liver, piles, fistula in ano, general debility, nervous debility, paralysis, consumption, disease of spleen, dyspepsia, disease of stomach, disease of rectum, disease of abdominal viscera, dropsy, asthma, nervous derangement, spinal irritation, disease of lungs, ulceration of bowels and vertigo.

RHEUMATISM may result in disease of heart, paralysis, disease of legs, disease of eyes and varicose veins.

SUNSTROKE may result in debility, nervous prostration, mental derangement, vertigo, disease of brain, insanity, disease of spine, deafness, disease of heart, paralysis, disease of eyes and epilepsy.

MEASLES may result in disease of lungs, disease of heart, disease of eyes, atrophy of testicles, asthma, bronchitis and chronic otorrhœa.

MALARIAL POISONING may result in disease of liver, disease of spleen, debility, indigestion, disease of heart, disease of kidneys, dropsy, neuralgia, disease of abdominal viscera and derangement of stomach and bowels.

ASTHMA may result in disease of lungs, loss of voice, emphysema, dilatation of right side of heart and dropsy.

TYPHOID FEVER may result in disease of lungs, disease of kidneys, disease of heart, disease of legs, enlargement of legs, debility, nervous debility, varicose veins, diarrhœa and derangement of nervous system.

GUN-SHOT WOUNDS may result in various disabilities, the character of which depends upon the location of the wound, etc.

INJURY OF ABDOMEN may result in spinal irritation, disease of stomach, disease of liver, peritonitis and adhesions.

INTERMITTENT FEVER may result in disease of lungs, rheumatism, debility and heart disease.

DISEASE OF HEART may result in disease of lungs, bronchitis, anasarca, paralysis and brain softening.

TYPHOID-MALARIAL FEVER may result in affection of head, affection of stomach and debility.

FEVER may result in debility, chronic diarrhœa, rheumatism, ulcers of leg and deafness.

DEAFNESS may result in disease of brain and spinal irritation.

SMALL-POX may result in disease of leg and disease of eyes, suppurative otitis, deafness—partial or complete.

CATARRH may result in bronchitis, disease of stomach, disease of middle ear, deafness and cerebal abscess.

TYPHUS FEVER may result in dyspepsia and hepatitis.

MALARIAL FEVER may result in indigestion, debility, nervous prostration and chronic dysentery.

INJURY OF SPINE may result in paralysis, locomotor ataxia, debility, neuralgia, epilepsy, curvature, hip-joint trouble and femoral abscess.

VACCINATION may result in loss of use of arm and blood poisoning.

DIPHTHERIA may result in paralysis and disease of throat. N. B.—The paralysis of diphtheria is usually *transient*.

VARICOSE VEINS may result in ulcers.

SCURVY may result in varicose veins and ulcers.

SCIATICA may result in injury of back and hip.

DISEASE OF ABDOMINAL VISCERA may result in disease of rectum.

GUN-SHOT WOUND OF HEAD may result in insanity, paralysis, disease of brain, disease of eyes, neuralgia and epilepsy.

GUN-SHOT WOUND OF LEG may result in varicose veins, rheumatism and paralysis.

INJURY OF HEAD may result in deafness, epilepsy, paralysis and insanity.

DISEASE OF LIVER may result in rheumatism, jaundice; often results in pleurisy of right lung.

JAUNDICE may result in debility, disease of liver and dropsy.

FEVER AND AGUE may result in disease of spleen.

BRAIN FEVER may result in epilepsy.

CONCUSSION may result in deafness, disease of brain and spinal irritation.

TYPHOID-PNEUMONIA may result in disease of lungs and disease of throat.

ABSCESS may result in varicose veins.

INJURY TO BACK may result in curvature of spine, paralysis and disease of kidneys.

INJURY OF CHEST may result in disease of lungs.

PLEURISY may result in pleuritic adhesions, displacement of heart and phthisis.

MALARIA may result in intermittent fever.

LOSS OF ONE EYE may result in affection of the other.

DISEASE OF LUNGS may result in disease of heart.

(3—143.)

Index Orig. Inv. Claim No. 639645

Pierre Haute Co. H, 34th Reg't Wis. Vol. Inf.

ARRANGE PAPERS IN INVALID CLAIMS—1. Declaration; 2. Soldier's statements as to origin; 3. A. G.; 4. S. G.; 5. Cert. of Dis. Let history as to origin, continuance, &c., follow in regular order. IN WIDOWS' AND DEPENDENT RELATIVES' CLAIMS—Let evidence of soldier's death, marriage, dependence, &c., follow evidence of origin and continuance of fatal disease.

o 6—113

NO.	NAME AND P. O. ADDRESS.	DATE OF FILING.	SUBJECT.
1	Claimant Bagley, Mich	Feby 11, '88	Declaration
2	A.G.	April 5, '88	Mil. history
3	L. LaPlante, Wequiock, Wis	Mar. 30, '88	2nd Lt. Clt's Co. Origin Dis. Rec. "Doubtful."
4	P.M., Wequiock, Wis	July 16, '88	As to affiant La Plante
5	Theodore Kopff, Beaver Dam City, Wis	May 19, '88	Asst Surg. Clt's Regt. Incurrence & treatment. Dis. Rec. Good
6	P.M., Beaver Dam, Wis.	Nov. 17, '88	Affiant Kopff good
7	John Collin Frank Bertrand	Mar. 13, '88	Comrades. Incurrence
8	P.M., Luxemburg, Wis.	July 18, '88	Affiant Bertrand good
9	P.M., Janet, Wis	Dec. 14, '88	Affiant Collin good.
10	A.G.	Sept. 21, '88	Presence of affiants Kopff LaPlante, Bertrand and Collins.
11	Bd. Exg Surgeons Marinette Wis	June 25, '88	Rating

(12893—75 M.)

a11c
417.889
Detroit

(3—125.)

ORIGINAL INVALID CLAIM.

Soldier, Pierre Haute
P. O., Bagley.
County, Menominee
State, Michigan

Rank, Private
Company, H
Regiment, 34th Wis. Vol. Inf.

Rates, $ 8 per month, commencing Feby 11, 1888

Pensioned for Right inguinal hernia

RECOGNIZED ATTORNEY.

Name, George E. Lemon
P. O., Washington D.C.

Fee, $ 25, Agent C to pay.
Articles filed Feby 20, 1888.

APPROVALS.

Approved for Hernia of Right Side
Submitted for Advis's Dec 19, 1888; Samuel Buckley, Examiner.

Approved for Hernia right side

Approved for Right inguinal hernia
8/18
CM7

White, Legal Reviewer.
Dec 27, 1888, W. Smith, Re-Reviewer.
Jan 27 1889.

Staples, Med. Ex'r, Med. Reviewer,
Jany 3rd, 1889, John Campbell, Med. Referee.

Clf signs by X. No M.C.

IMPORTANT DATES.

Enlisted, November 24, 1862
Mustered, 18 .
Discharged September 8, 1863.
Declaration filed Feby 11 1888.

service from 18 , to , 18 , in
Not in service since Sept. 8 1863
declaration

BASIS OF CLAIM.

That at Memphis, Tenn., July 1863, he incurred Rupture of Right Side

CLAIM FOR Widow's Application for Accrued Pension

STATE OF Michigan, COUNTY OF Menominee SS:

On this 22 day of November 1898, personally appeared before me, a Notary Public in and for the County and State aforesaid, Clemence Haute (Name of Claimant here.) of ~~Carney~~ Nathan (P. O. address here.) in the County of Menominee (Name of County.) and State of Mich (Name of State.) who, being duly sworn according to law, declares that his age is 57 (Age here.) years; that she is a resident of Nathan (Place of residence.) County of Menominee (County.) State of Mich (State.) and that she is the identical Widow of Pierre Haute (Name of Claimant.) who enlisted as a Private (State rank.) in Company K (Letter of Co.) of the 34" (No. of Reg't.) Regiment of Wis Inft (Name of State to which Reg't accredited.) Volunteers, on the 6" day of Dec 1862, (Date of enlistment, month and year.) and who was discharged from the service of the United States at Milwaukee (Place where discharged.) on the 18" (Day of discharge.) day of Sept 1863, (Month and year of discharge.) by reason of (For what reason discharged.)

That he again enlisted under the name of Did not Reenlist as a (State rank.) in Company (Letter of Co.) of the (No. of Reg't.) Regiment of (Name of State to which Reg't. was accredited.) Volunteers, on the day of 186 , (Date of enlistment, month and year.) and was discharged from the service of the United States at (Place where discharged.) on the (Day of discharge.) day of 186 , (Month and year of discharge.) by reason of (For what reason discharged.)

and that this application is made for the purpose of procuring Widow's accrued Pension Soldier was a pensioner under the General Law at rate of $12⁰⁰ per month Ctf No. 417.889 for right inguinal hernia. She is the legal widow of soldier having been married to him Mar 25" 1872

He also declares that he was born at , State of , on or about the day of 18 ; that his height is feet, inches; complexion ; color of hair ; eyes

That he has not sold, loaned, or bartered his DISCHARGE, or any portion or interest in any Pay or Bounty due him; and hereby authorizes and empowers, with full power of substitution,

J. B. CRALLE & CO.,

OF WASHINGTON, D. C.,

to prosecute this his claim, and to do any act in his name necessary to the full and final settlement of the claim.

Ruth Garrigan
Paul Brunette
If claimant signs by mark, two witnesses sign here.

Clemence her X mark Haute
Claimant's Signature.

ATT'Y FILED.

PENSION B DEC 10 1898 U. S. OFFICE.

U. S. PENSION OFFICE. DEC 10 1898

Accrued '98

Also personally appeared Ruth Garrigan, residing at
Name of first Witness here.
Carney Mich, and Paul Brunette,
Name of second Witness here.
residing at Nathan Mich, persons whom I certify to be respectable and entitled to credit, and who, being by me duly sworn, say they were present and saw Clemence Haute, claimant, ~~sign his name~~ (or make ~~his~~ her mark) to the foregoing declaration; that they have every reason to believe from the appearance of said claimant and their acquaintance with ~~him~~ her of 5 years, and 6 years respectively, that she is the identical person she represents ~~himself~~ Herself to be; and that they have no interest in the prosecution of this claim.

Ruth Garrigan

Paul Brunette

If either witness signs by mark, two persons who write sign here.

Signature of witnesses.

Sworn to and subscribed before me this 22 day of November, A. D., 1898,
and I do hereby certify that the contents of the above declaration, etc., were fully made known and explained to the applicant and witnesses before swearing, including the words Sign His Name & His; Him; He, He, Himself erased, and the words Her, Her, She, She, Herself, added; and that I have no interest, direct or indirect, in the prosecution of this claim.

[L. S.]

Peter Garrigan
Signature.

Notary Public
Official Character.

I HEREBY CERTIFY, That before whom the foregoing declaration and affidavit were made, is a duly authorized to administer oaths, and that the above is his signature.

IN WITNESS WHEREOF, I have hereunto set my hand and official seal, this day of 189 .

[L. S.]

Clerk of the

Note.—In all cases where a mark is substituted for the written signature, two disinterested witnesses are required.

Clerk of Court certificate not needed if the Notary or Justice of the Peace or other officer before whom you execute this application uses a seal; otherwise certificate of Clerk of Court *must* be attached.

CLAIM FOR.
Accrued Pension
Sec. 4718 R.S.

Clemence Haute Wid.
of Pierre Haute

Late Pvt. in Co. D 34th Reg't.
of Wis. Inf. Vols.

#663276
W.O.

DEC 13 1898

FILED BY
J. B. Cralle & Co.
Claim Attorneys,
CRALLE BUILDING,
108 C St., N. W., Washington, D. C.

3—517.

RECORD DIVISION.

Department of the Interior,

BUREAU OF PENSIONS.

Briefed by

Claim No.

Certificate No. 417889

Claimant

Soldier Pierre Haute

Service E 34 Wis Inf

Additional Service

Other Oct 23/96

No. Claim, New Records Buckley

No. Claim, Old Records

REMARKS:

MR Show no Wid claim

F. B. Olbert

Chief Division.

b—100 m 0 8

([illegible]145)

Increase INVALID PENSION.

Ctf. # 417889

Claimant, Pierre Haute, dec'd; Clemence Haute, widow compltg.

P.O.,	Nathan	Rank,	Private
County,	Menominee	Company,	H
State.	Michigan	Regiment,	34 Wis. Vol. Inf.

Rate, $ per month, commencing

REJECTED APR 19 1900

Disabled by

RECOGNIZED ATTORNEY:

Name,	Milo B. Stevens & Co.,	Fee $ 2.00, Agent	to pay.
P.O.,	Detroit, Mich.	Articles filed	, 18 .

APPROVALS:

Submitted for Adm., March 21, 1900. Chas. M. Yeates, Examiner.

Approved for right inguinal hernia (complicated).
Pension to end May 7, 1896, date of soldier's death and pay widow as above.

Approved for Right inguinal hernia (complicated) 12/18 ~~from December 4. 1892~~ No Increase. Ruling 245 does not apply.

Hayes

Most

March 23, 1900, W. P. Wetherell, Legal Reviewer. March 28, 1900, J. F. Raub, Medical Referee.

~~March 27" 1900~~ Berger Retter

Discharged September 8, 1863. Last paid to , at $ 12

Pensioned from February 11, 1888, at $ 8, for right inguinal hernia (complicated)

Original declaration filed February 11, 1888; alleged as above

Arrears allowed from , 18 , to , 18 , at $

PRESENT CLAIM.

Declaration filed August 8, 1892 Same.

6—221

Widow signs by mark. No M.C.

2 Detroit

3–562.

ACCRUED PENSION.

Act of March 2, 1895.

Western Division.

Certificate No. 417,889, Last issue October 20, 1890,

Pensioner, Pierre Haute, Act July 14, 1862,

Date of death, May 7, 1896,

Claimant, Clemence Haute Widow,

Nathan,

Menominee County,

Michigan,

West.

Certificate is filed. ~~Voucher (not filed.~~ J.

Submitted for admission, December 21, 1898,

Re " " " March 7, 1900

~~C. S. Harrison~~ Chas. M. Yeates Examiner.

BOARD OF REVIEW.

Approved for admission.

Pay widow as above

W. P. Mitchell Reviewer, March 7, 1900
April 2, 1900

W Berger

Mch 3" 1900 Rekd April 3" 1900

CERTIFICATE DIVISION.

Accrued Pension Certificate and Order
Issued April 4, 1900, ~~189~~
Mailed " 10, " , ~~189~~

Payable to Widow

Original certificate and voucher

0–4 5364b15m1-98

Signs by "Mark",

No M. C.

GENERAL AFFIDAVIT

State of Michigan, **County of** Menominee

In the matter of Clemence Haute widow of Pierre Haute late a Private in Co. H. of the 34 Reg't of Wisc Infty Vols., for Widow's Pension

On this 22nd day of June, A. D., 1897, personally appeared before me, a Notary Public in and for the aforesaid County, duly authorized to administer oaths, J. H. Slater, aged 31 years, a resident of Stephenson in the County of Menominee and State of Mich, whose Postoffice address is Stephenson, and well known to me to be reputable and entitled to credit, and who, being duly sworn, declared in relation to aforesaid case as follows:

(Affiant should state his means of knowing the facts to which he testifies.)

I attended Pierre Haute in his last illness and the immediate cause of his death was heart disease complicated with Emphysema Said Pierre Haute Died on the 7th day of May A.D. 1896

I do - - - further declare that I have no interest in said case and am not concerned in its prosecution.

U. S. PENSION OFFICE SEP 3 1897

If affiant signs by mark, two persons who can write sign here.

J. H. Slater
Signature of Affiant.

Date & cause of death ✓

d & c o d.

State of Michigan County of Menominee, ss:

Sworn to and subscribed before me this 22 day of June, A. D. 1897, by the above-named affiant, and I certify that I read said affidavit to said affiant, including all the words erased, and all the words added, and acquainted him with its contents before He executed the same. I further certify that I am in nowise interested in said case, nor am I concerned in its prosecution; and that said affiant is personally known to me, and that He credible person.

Peter Garrigan
Official Signature.

(L. S.)

Notary Public
Official Character.

I, Henry J. Wormser clerk of the County Court in and for aforesaid County and State, do certify that Peter Garrigan Esq. who hath signed his name to the foregoing declaration and affidavit, was at the time of so doing a Notary Public in and for said County and State duly commissioned and sworn; that all his official acts are entitled to full faith and credit, and that his signature thereunto is genuine.

Witness my hand and seal of office, this 26 day of June 1897.

Henry J. Wormser

[L. S.]

Clerk of the Circuit Court

This affidavit may be sworn to before any officer authorized to administer oaths. If executed before a Notary or Justice, however, the certificate of Clerk of Court should be attached, showing official capacity of said Notary or Justice, if such certificate be not already on file.

ADDITIONAL EVIDENCE.

CLAIM OF

Clemence Haute
widow
Pierre Haute

Late in Co. "K"—34th Reg't.

of Wisc. Inf. Vols.

Character of Claim.

Widow's Pension

No 653,516.

FILED BY

J. B. Cralle & Co.,
Pension Attorneys,
CRALLE BUILDING,
108 C Street, N. W.,
WASHINGTON, D. C.

Faithorn Junction Aug. 17 1901.

STATE OF MICHIGAN)
COUNTY OF MENOMINEE)SS
)

i the undersigned Township Clerk of the Township of Holmes do hereby certify that after a carefull search of the records of said Township I find that at the time of the death of Pierre Houte on May 7.1896 there was no record of Births adbDeaths kept in this T Township and that after a carefull search of all records of said Township I find no record of the death of the said Pierre Houte And further this deponent saith not.

Taken suscribed and sworn to)
before me this 17 day of Aug.)
A.D.1901.)

Clarence Harty
Township Clerk (seal)

Peter Garrigan

Notary Public.

PETER GARRIGAN

PENSION
I
SEP
20
1901
U. S.
OFFICE.

Claim of
Clemence Haute
Widow of
Pierre Haute
Co. H 34th Wis
Inft. Vols

For
Widow's Pension
General Law

cert no. 491.236

Ad files
Filed by
J. B. Cralle & Co.
Washington D.C

O. W. & N. DIVISION
SEP 23 1901
RECEIVED.

W.O. 653.276
WC 491.236
Pierre Haute
H. 34 Wis. Inf

OCT 18 1901

BOARD OF REVIEW.
OCT 18 1901

RECEIVED
OCT 19 1901
WESTERN DIVISION.

MEDICAL AFFIDAVIT.

This affidavit can be used by Regimental or Assistant Surgeon, or any physician who can testify in any way in behalf of claimant. The affidavit should, if possible be in the handwriting of the Surgeon or physician testifying, and should embody all the facts in affiant's possession as to the origin and continuance of claimant's disability. The dates of treatment should be especially set forth, and also affiant's means of knowing the facts to which he testifies.

State of Wisconsin, County of Brown ss:

In the Pension Claim No.

of Clemence Haute widow of Pierre Haute

late a Private in Co. H of the 34 Reg't of Wisc. Infi. Vols.
(Company and Regiment of service, if in the army; or Vessel and Rank, if in the Navy.)

Personally came before me a notary Public in and for the aforesaid County and State, Charles Wackenriter M.D., a citizen of Town Pittsfield, whose Postoffice address is Flintville, County of Brown, State of Wisconsin well known to me to be reputable and entitled to credit, and who, being duly sworn, declared in relation to aforesaid case as follows:

That he is a practicing physician, and that he has been acquainted with said soldier for about 14 years, and that on October 15th 1886 has medical services
(Here state all the facts known to the affiant in accordance with the marginal instructions. No erasures of interlineations are allowed unless the magistrate certifies in his jurat that they were made before the execution of the paper.)
rendered to the late Pierre Haute of Bagley Menominee County, State of Michigan in his sickness = Peritonitis = caused from his inguinal hernia = Hernia interstitialis descendens at scrotum, that he also has treated him on January 24th 1887 in his sickness = Nausea and Vomiting caused by incarcerated Hernia. After reposing by Taxis and ordering Truss = Recovery.

(The late Pierre Haute a man of strong constitution has told the undersigned) That said Hernia incurred during his service as soldier in the late Civil War in duty.

The opinion of the undersigned was that said Haute would suffer of the consequences of said Hernia all his life time and would never be able to perform any manual labor at all.

The late Pierre Haute has been married to Clemence Haute, his present widow and the undersigned has seen the widow frequently during the medical attendance in the residence of Haute taking care and nursing her husband.

U.S. PENSION OFFICE DEC 20 1891

Med. treatment for hernia & peritonitis

NOTES.

The physician, in order to cover the required points, should read carefully the following notes, and unless they are complied with the affidavit will be worthless and ineffective.

1st. Whether or not he knew the soldier prior to enlistment; the length of time he has known him; how intimately and what opportunities he has had of observing his physical condition; whether as his family physician or as a neighbor, and how near he has lived to him. If he knew that the soldier was a sound man at enlistment, he should so state, adding, if true, that had he been unsound he would have known it.

2d. If he treated claimant while in the service, either as his regimental surgeon or while claimant was home on furlough that fact should be stated. The claimant's physical condition at such times should be clearly shown, as well as the NATURE OF HIS DISABILITY and dates of treatment.

3d. If he has treated soldier since discharge, he should so state, giving the date of his first treatment: what his physical condition was at the time, with complete diagnosis of the disability; the period during which he treated him should be stated, with dates, as near as possible, of the prescriptions.

4th. Affiant should take especial care to state, to the best of his recollection and ability, to what fractional extent claimant has been disabled for performance of manual labor, whether ½, ⅓, ¼, ⅔, ¾, or entirely during each year, from discharge to the present time, or such time as affiant's testimony covers.

He further declares that he has practiced medicine 27 years, and that he has no interest either direct or indirect, in the prosecution of this claim.

Charles Wackenreuter M.D.
Affiant's Signature.
Physician and Surgeon

Sworn to and subscribed before me this 6th day of December, A. D. 1897, and I hereby certify that the affiant is a practicing physician in good professional standing; that the contents of the above declaration, etc., were fully made known to him before swearing, including all the words ________ erased, and all the words ________ added, and that I have no interest, either direct or indirect, in the prosecution of this claim.

L. R. Lamb Sr.
Official Signature.

Notary Public
Official Character.

L. R. LAMB SR. NOTARY PUBLIC BROWN CO. WIS.

[L. S.]

☞Execute this before an officer having a seal.

MEDICAL EVIDENCE.

CLAIM OF

Clemence Haase widow of Pierre Haase

Late .... in Co. "E" 24" Reg't.

of Wis Inf Vols.

FOR

Widows Genl Law

No 653,276

AFFIDAVIT OF

Dr. ....

FILED BY
J. B. Cralle & Co.,
Pension Attorneys,
CRALLE BUILDING,
108 C Street, N. W.,
WASHINGTON, D. C.

No. 6. [**Dependent's.**]

Neighbor's or other Person's Affidavit.

STATE OF Wisconsin, COUNTY OF Brown SS:

In the matter of Clemence Haute widow of Pierre Haute *late a* Soldier Privat *in Co.* #34 *of the* .... *Reg't. of* Wisconsin Inft *Vols.,*

On this 12th *day of* February *A. D., 189*8, *personally appeared before me, a* Justice of the Peace *in and for the aforesaid County, duly authorized to administer oaths* Pierre Pillet *aged* 86 *years, a resident of* Humboldt
Name of Affiant. Residence.
in the County of Brown *and State of* Wisconsin *whose Postoffice address is* Schiller *and well known to me to be*
Here state P. O. address of Affiant.
reputable and entitled to credit, and who, being duly sworn, declares in relation to aforesaid case as follows:

That his occupation is Farmer
Affiant should here state his occupation.

and the soldier's was Farmer; and that he became acquainted
Here state the soldier's occupation prior to death.

with said soldier in the year of 1862; and that his acquaintance with him was
Here state year acquaintance began.

continuous from that time up to the 7th of May, 1896.
Here state the date of soldier's death, if acquaintance so continued; if not, state the year it ceased.

and that he has lived within Sixty miles of him
Here state how near you lived to the soldier.

and that he saw him 2 or 3 times a week during (10) ten years after his discharge. ~~on an~~
State how often you saw the soldier, on an average.
~~average, during the above period.~~

At
After the word "At" state the following: "The time of the soldier's return home from the army at discharge; or, if you did not know of his disabilities then, state the date from which you first gained knowledge that he suffered from his disabilities."

In the month of in the year of 1865 said
Here state the month and year of the soldier's discharge; or, if you did not know then, state when you first knew of his disabilities

soldier was suffering from Hernia, or rupture on the right side at date of my acquaint
State the disabilities the soldier was suffering from at discharge, or at date of your acquaintance, if it began later.

and was affected as follows by said disabilities: being unable to do manual labor at the
State how the soldier was affected by his disabilities at the date of his discharge, or at the date you first knew of them.

That he continued to suffer from said disabilities in the manner described from the time stated up to the time of his death and during each and every
Here state "time of his death," or the date your knowledge of his disabilities ceased.

year of the above period the soldier was disabled by reason of said disabilities to the extent of at least 3/4
Here state, to the best of your knowledge and belief, the extent to which the soldier was disabled, whether ¼, ⅓, ½, ⅔, ¾, or totally, as the case may be,

for the performance of manual labor by reason of above stated disabilities, and in consequence thereof lost about three quarters of his time.
State, as near as you can, the amount of time lost, whether ¼, ⅓, ½, ⅔, ¾, or entirely, as the case may have been.

PENSION OFFICE
MAR 1 1898
U. S.

That his means of knowing the facts above testified to are as follows:
You not being a physician, you are required to state how you know the facts you have testified to. You should, therefore, state whether you ever nursed the soldier; sat up with him when suffering with his disabilities and confined to his house; or worked for him, or exchanged work with him; or assisted him in any way; or heard his physician speak of his

heard soldier mention his disabilities

disabilities in any way; or the soldier mention his disabilities. In case of rupture, the affiant should be careful to state how he knew of its existence immediately after soldier's discharge; such as soldier having shown him the rupture; having seen soldier's uncovered body while bathing or dressing; or having seen him adjust his truss, or as the case may have been.

(8) 63-96

Pierre Pillet further declares that he has no interest in said case and is not concerned in its prosecution.

Postoffice address of affiant is Schiller P. O.
Brown County, State of Wisconsin

~~Frank Germiat~~
Elise Germiat
If affiant signs by mark, two persons who can write sign here.

Pierre his X mark Pillet
Signature of Affiant.

State of Wisconsin, **County of** Brown, **ss:**

Sworn to and subscribed before me this 12th day of February, A. D. 1898, by the above-named affiant, and I certify that I read said affidavit to said affiant, including all the words erased, and all the words added, and acquainted him with its contents before he executed the same. I further certify that I am in nowise interested in said case, nor am I concerned in its prosecution; and that said affiant is personally known to me, and that he is a credible person.

Charles Germiat
Official Signature.

(L. S.)

Justice of the Peace
Official Character.

NOTE.—This can be executed before any officer authorized to administer oaths for general purposes.

NEIGHBOR'S OR OTHER PERSON'S AFFIDAVIT,
AS TO THE EXISTENCE AND CONTINUANCE OF SOLDIER'S DISABILITIES.

CLAIM OF
Clemence Hautte widow of Pierre Hautte
Late a Private in Co. H 34 Reg't.
of Wisconsin Inft Vols.

Character of Claim.
Widows - Genl Law
No. 65376.

FILED BY
J. B. Cralle & Co.,
Pension Attorneys,
CRALLE BUILDING,
108 C Street, N. W.,
WASHINGTON, D. C.

Post-office address: Champion

Nov. 22, 1901

SIR:

In reply to your request I have to state that Pierre Haute while in the Service at Memphis Tennessee on or about the Middle of July 1863 Suffered from pain in his left Side that he had palpitation of the heart and was very Short winded

Very respectfully,

Joseph Laurent

COMMISSIONER OF PENSIONS,
Washington, D. C.

3–375.
(Old No. 3–489.)

West, Div. ACA, Ex'r.

Wid. Ctf. No. 491,236,
Clemence Haute, wid,
Pierre Haute
K "34" Wis, Vol, Inf,
Act July 14, 1862,

WESTERN DIVISION
NOV 27 1901

Department of the Interior,

BUREAU OF PENSIONS,

Washington, D. C., Nov. 15", 1901

SIR:

To aid this Bureau in the adjudication of the above-entitled claim for pension, please furnish a statement in your own handwriting setting forth all the facts within your personal knowledge relative to the incurrence of any wound, injury, or disease, by Pierre Haute *while in the service.*

U. S. PENSION OFFICE
I
NOV 26 1901

In your reply please be as specific as possible in respect to dates, and describe, as clearly as you can, the nature, symptoms, and extent of the disability.

Kindly answer upon the reverse of this letter and return the same in the inclosed envelope, which requires no postage.

Very respectfully,

J. L. Davenport
Acting *Commissioner.*

Mr. Joseph Laurent,
Champion,
Wis.

NOTE.—If you are unable to write, it is suggested that you request some competent person to aid you in replying to this circular, your signature to be witnessed by the *Postmaster* or some other *United States official*, who should certify that the contents were fully made known to you before signing.

0-2

[OVER.]

No. 3.

FOR THE AFFIDAVIT OF AN OFFICER, ORDERLY SERGEANT OR COMRADE,
As to Incurrence of Claimant's Disability or Disabilities.

☞ The person making affidavit on this blank should be careful to fill in *all* the blank spaces *as fully as possible.* The paper may be sworn to before any officer authorized to administer oaths.

STATE OF x Wisconsin, COUNTY OF x Brown SS:

In the Pension Claim No. ______ *of* Clemence widow of Pierre Haute *late a* Private *in Co.* H *of the* 34 *Reg't. of* Wisc Inf. *Vols., personally appeared before me, a* x a notary public in *and for the aforesaid County, duly authorized to administer oaths* x Joseph Laurent *aged* x 59 *years, a resident of*

(Affiant's Name here.) (Age.)

x Champion *in the County of* x Brown *and*

(Affiant's place of residence here.) (County here.)

State of x Wisconsin *who being duly sworn, according to law, states that he was a* x private in Co. H of the 34 Reg't. of Wisc Inf. Vols., under the name of Jean Francois Laurent and was well acquainted with Pierre Haute this applicant for Pension, and

(Here affiant should state claimant's name.)

know him to be the identical person of that name who served as a Private in Company H 34 Regiment of Wisc Inf. Vols.

(Here name the State to which Reg't. was accredited, and whether Infantry, Cavalry or Artillery.)

THAT THE SAID Pierre Haute while in the line of duty,

(Claimant's Name here.)

incurred Disease of the Heart

(Here state the wound, injury or disease claimant first incurred.)

at or near Memphis State of x Tenessee on or about

(State at or near what place claimant incurred his disability.) (Name of State.)

the 15th day of July year of 1863, under the following circumstances: x He had palpitation of the heart. his wind was very short and he had frequent pains in his left side

(Day.) (Month or season.) (Year.) (Here state all of the circumstances under which claimant incurred the disability. Write them out as fully as you can.)

CLAIMANT ALSO INCURRED ______

(Here state the second disability claimant incurred, if he incurred more than one.)

at or near ______ State of ______ on or about

(State at or near what place claimant incurred his disability.) (Name of State.)

the ______ day of ______ year of ______, under the following circumstances: ______

(Day.) (Month or season.) (Year.) (Here state all of the circumstances under which claimant incurred the disability. Write them out as fully as you possibly can.)

THIRD DISABILITY ______

(Here state the third disability claimant incurred, if he incurred more than two.)

incurred at or near ______ State of ______ on or about

(State at or near what place claimant incurred his disability.) (Name of State.)

the ______ day of ______ year of ______, under the following circumstances:

(Day.) (Month or season.) (Year.) (Here state all of the circumstances under which claimant incurred the disability. Write them out as fully as you possibly can.)

FOURTH DISABILITY ______

(Here state the fourth disability claimant incurred, if he incurred more than three.)

incurred at or near ______ State of ______ on or about

(State at or near what place claimant incurred his disability.) (Name of State.)

the ______ day of ______ year of ______, under the following circumstances:

(Day.) (Month or season.) (Year.) (Here state all of the circumstances under which claimant incurred the disability. Write them out as fully as you possibly can.)

That claimant's disabilities existed up to and at the date ______

(Here state "of discharge," if you know his disabilities existed at that time, and if you do not know it, state why you have no knowledge of that fact.)

PENSION U. S. DEC 8 1900 OFFICE

That the facts are personally known to the affiant by reason of having seen him suffer and heard him complain and of having seen him obliged to sit down for shortness of wind and seeing him hold his hand unto his left side trying to stop the throbing of his heart. and of having held his own hand onto Haute left side and so felt the beating of Haute's heart

The affiant should here state his rank, Co. and Reg't. and whether he was with the command at the time the claimant contracted his disability, and if he saw claimant when he was first taken sick, and how he was affected, and in fact, all the circumstances he can possibly remember touching the claimant's incurrence of his disability. In a case of rupture, wound or injury, affiant should state if he saw the same at the time it was incurred or soon after, or at any time during the service, and should, if possible, describe its location and appearance All the facts known to affiant relative to soldier's medical treatment for his disability while in the service should be stated, giving time and place, if possible

He further declares that he has no interest in said case and is not concerned in its prosecution.

Post office address of affiant is Champion
Wisconsin

Eliza Petiniot
Julia M. Dupont
If affiant signs by mark, two persons who can write sign here.

Joseph Laurent
Signature of Affiant.

State of Wisconsin, County of Brown, ss:

Sworn to and subscribed before me this 30th day of November, A. D. 1900. by the above-named affiant, and I certify that I read said affidavit to said affiant, including all the words ____ erased, and all the words ____ added, and acquainted him with its contents before he executed the same. I further certify that I am in nowise interested in said case, nor am I concerned in its prosecution; and that said affiant is personally known to me, and that he is a credible person.

G. Dupont
Official Signature.

Notary Public
Official Character.

(L. S.)

NOTE.—This can be executed before any officer authorized to administer oaths for general purposes.

AFFIDAVIT OF A
COMMISSIONED OFFICER
FIRST (ORDERLY) SERGEANT,
OR A
COMRADE,
As to incurrence of Claimant's
Disability or Disabilities.

CLAIM OF

Clemence, Widow of Pierre Haute,
Late ---- in Co. H, 34th Reg't.
of Wis. Inft. Vols.

Character of Claim.

Widow's Pension
(act of July 14, 1862)
Ctf. No. 491,236

DEC 10 190[illegible]
DIVISION B

FILED BY
J. B. Cralle & Co.,
PENSION ATTORNEYS,
CRALLE BUILDING,
108 C St., N. W., WASHINGTON, D. C.

No. 3.

FOR THE AFFIDAVIT OF AN OFFICER, ORDERLY SERGEANT OR COMRADE,

As to Incurrence of Claimant's Disability or Disabilities.

☞ The person making affidavit on this blank should be careful to fill in *all* the blank spaces *as fully as possible*. The paper may be sworn to before any officer authorized to administer oaths.

State of Wisconsin County of Brown

In the Pension Claim No. ____ *of* Clemence Haute widow of Pierre Haute *late a* private *in Co.* H *of the* 34 *Reg't. of* Wisconsin *Vols., personally appeared before me, a* Notary Public *in and for the aforesaid County, duly authorized to administer oaths* Eugene Delforge (Affiant's Name here.) *aged* 73 (Age.) *years, a resident of* Rosiere (Affiant's place of residence here.) *in the County of* Door (County here.) *and State of* Wisconsin *who being duly sworn, according to law, states that he was a* Private in Co. H. of the 34 Reg't. of Wisconsin Vols., and was well acquainted with Pierre Haute (Here affiant should state ~~claimant's~~ Soldier name.) this applicant for Pension, and know him to be the identical person of that name who served as a Private in Company H 34 Regiment of Wisconsin Inf Vols. (Here name the State to which Reg't. was accredited, and whether Infantry, Cavalry or Artillery.)

THAT THE SAID Pierre Haute (~~Claimant's~~ Soldier Name here.) while in the line of duty, incurred Desease of the heart (Here state the wound, injury or disease ~~claimant~~ soldier first incurred.) at or near Memphis (State at or near what place ~~claimant~~ soldier incurred his disability.) State of Tennessee (Name of State.) on or about the 10th (Day.) day of July (Month or season.) year of 1863 (Year.), under the following circumstances: (Here state all of the circumstances under which claimant incurred the disability. Write them out as fully as you can.) He became weak and short winded. there were spels when he could hardly walk or do any exercise. because his respiration was labored and his pulsation quick and irregular. he also had palpitation of the heart. he could not lay on his left side. and he often had to set up in bed by night for as much as an hour at a time because his wind was short and his heart would beat so he did not complain of any very sharp pain, but he complained of a dull pain on his left side. and also of a heavy feeling. and of feeling very tired

~~CLAIMANT~~ Soldier ALSO INCURRED ____ (Here state the second disability ~~claimant~~ soldier incurred, if he incurred more than one.) at or near ____ (State at or near what place ~~claimant~~ soldier incurred his disability.) State of ____ (Name of State.) on or about the ____ (Day.) day of ____ (Month or season.) year of ____ (Year.), under the following circumstances: (Here state all of the circumstances under which claimant incurred the disability. Write them out as fully as you possibly can.)

THIRD DISABILITY ____ (Here state the third disability claimant incurred, if he incurred more than two.) incurred at or near ____ (State at or near what place claimant incurred his disability.) State of ____ (Name of State.) on or about the ____ (Day.) day of ____ (Month or season.) year of ____ (Year.), under the following circumstances: (Here state all of the circumstances under which claimant incurred the disability. Write them out as fully as you possibly can.)

FOURTH DISABILITY ____ (Here state the fourth disability claimant incurred, if he incurred more than three.) incurred at or near ____ (State at or near what place claimant incurred his disability.) State of ____ (Name of State.) on or about the ____ (Day.) day of ____ (Month or season.) year of ____ (Year.), under the following circumstances: ____ (Here state all of the circumstances under which claimant incurred the disability. Write them out as fully as you possibly can.)

That claimant's disabilities existed up to and at the date ____ (Here state "of discharge," if you know his disabilities existed at that time, and if you do not know it, state why you have no knowledge of that fact.)

PENSION
DEC 8 1900
U. S.
OFFICE

That the facts are personally known to the affiant by reason of having Stood guard with him, and marched with him, and of having Slept with him.

The affiant should here state his rank, Co. and Reg't. and whether he was with the command at the time the claimant contracted his disability, and if he saw claimant when he was first taken sick, and how he was affected, and in fact, all the circumstances he can possibly remember touching the claimant's incurrence of his disability. In a case of rupture, wound or injury, affiant should state if he saw the same at the time it was incurred or soon after, or at any time during the service, and should, if possible, describe its location and appearance

All the facts known to affiant relative to soldier's medical treatment for his disability while in the service should be stated, giving time and place, if possible.

He further declares that he has no interest in said case and is not concerned in its prosecution.

Postoffice address of affiant is Rosiere, Kewaunee Co
Wisconsin

Aug. Bodart
Henry. Westcott.
If affiant signs by mark, two persons who can write sign here.

Eugene his X mark Delforge
Signature of Affiant.

State of Wisconsin, County of Brown, ss:

Sworn to and subscribed before me this 30th day of November, A. D. 1900 by the above-named affiant, and I certify that I read said affidavit to said affiant, including all the words erased, and all the words added, and acquainted him with its contents before he executed the same. I further certify that I am in nowise interested in said case, nor am I concerned in its prosecution; and that said affiant is personally known to me, and that he is a credible person.

G. Dupont
Official Signature.

(L. S.)

Notary Public
Official Character.

NOTE.—This can be executed before any officer authorized to administer oaths for general purposes.

AFFIDAVIT OF A
COMMISSIONED OFFICER
FIRST (ORDERLY) SERGEANT,
OR A
COMRADE,
As to incurrence of Claimant's
Disability or Disabilities.

CLAIM OF

Clemence, Widow of Pierre Haute
Late " in Co. H, 34th Reg't.
of Wisc. Inft. Vols.

Character of Claim
Widow's Pension (act July 14/62)
Ctf. No. 491,236.

FILED BY
J. B. Cralle & Co.,
Pension Attorneys,
CRALLE BUILDING,
108 C Street, N. W.,
WASHINGTON, D. C.

MEDICAL AFFIDAVIT.

This affidavit can be used by Regimental or Assistant Surgeon, or any physician who can testify in any way in behalf of claimant. The affidavit should, if possible, be in the handwriting of the Surgeon or physician testifying, and should embody all the facts in affiant's possession as to the origin and continuance of claimant's disability. The dates of treatment should be especially set forth, and also affiant's means of knowing the facts to which he testifies.

STATE OF Utah, COUNTY OF Utah SS:

In the Pension Claim No.

of Clemence Widow of Pierre Haude

late a in Co. H of the 34" Reg't of Ohio Infy Vols.

(Company and Regiment of service, if in the army; or Vessel and Rank, if in the Navy.)

Personally came before me a Notary Public in and for the aforesaid County and State, John H. Stater M.D., a citizen of Spanish Fork, whose Postoffice address is Spanish Fork City, County of Utah, State of Utah well known to me to be reputable and entitled to credit, and who, being duly sworn, declared in relation to aforesaid case as follows:

That he is a practicing physician, and that he has been acquainted with said soldier for about years, and that he did not know soilder prior to enlistment;

(Here state all the facts known to the affiant in accordance with the marginal instructions. No erasures or interlineations are allowed unless the magistrate certifies in his jurat that they were made before the execution of the paper.)

That his acquaintance with said soilder was only during his last sickness: that in this last sickness he found Pierre Houde suffering with emphysema and extensive dilatation of heart with murmurs of almost every valve. This sickness resulted in death with no improvement whatever under treatment.

NOTES.

The physician, in order to cover the required points, should read carefully the following notes, and unless they are complied with the affidavit will be worthless and ineffective.

1st. Whether or not he knew the soldier prior to enlistment; the length of time he has known him; how intimately and what opportunities he has had of observing his physical condition; whether as his family physician or as a neighbor, and how near he has lived to him. If he knew that the soldier was a sound man at enlistment, he should so state, adding, if true, that had he been unsound he would have known it.

2d. If he treated claimant while in the service, either as his regimental surgeon or while claimant was home on furlough that fact should be stated. The claimant's physical condition at such times should be clearly shown, as well as the NATURE OF HIS DISABILITY and dates of treatment.

3d. If he has treated soldier since discharge, he should so state, giving the date of his first treatment: what his physical condition was at the time, with complete diagnosis of the disability; the period during which he treated him should be stated, with dates, as nearly as possible, of the prescriptions.

4th. Affiant should take especial care to state, to the best of his recollection and ability, to what fractional extent claimant has been disabled for performance of manual labor, whether ½, ⅓, ¼, ⅕, ⅙, or entirely during each year, from discharge to the present time, or such time as affiant's testimony covers.

PENSION L AUG 24 1901 U. S. OFFICE

He further declares that he has practiced medicine 6 years, and that he has no interest, either direct or indirect, in the prosecution of this claim.

J. H. Slater M. D.
Affiant's Signature.

Sworn to and subscribed before me this 10th day of July, A. D. 1901, and I hereby certify that the affiant is a practicing physician in good professional standing; that the contents of the above declaration, etc., were fully made known to him before swearing, including all the words erased, and all the words added, and that I have no interest, either direct or indirect, in the prosecution of this claim.

My Commission Expires
April 9 1905

(L. S.)

Samuel Connaby
Official Signature.

Notary Public
Official Character.

MEDICAL EVIDENCE.

CLAIM OF Clemence Houte widow of
Pierre Houte

Late in Co. H 34 Reg't.
of Mich Inf Vols.

Character of Claim.

Widows Pension
Civil War

Ctf. No. 491236

AFFIDAVIT OF

Dr. John H. Slater

WESTERN S
AUG 27 1901
P DIVISION B

FILED BY

J. B. Cralle & Co.,
PENSION ATTORNEYS,
CRALLE BUILDING,
108 C St. N. W., WASHINGTON, D. C.

3-[illegible]84.

BUREAU OF PENSIONS

BOARD OF REVIEW.

April 2, 1900

Widow No. 653.276
Inv. Ct 417.889
Soldier, Pierre Hunter
Co. H, 34 Reg't Mo Inf

When Certificate is issued, return papers to Bd. of Rev Div. for action on letters of acceptance of Invalid Inc claim; after which return to Western Division for action on widow's claim, general law

W. P. Wetterell
Rev.

T. W. DALTON,
Chief Board of Review.

No. 3.

FOR THE AFFIDAVIT OF AN OFFICER, ORDERLY SERGEANT OR COMRADE,

As to Incurrence of Soldiers ~~Claimant's~~ Disability or Disabilities.

☞ The person making affidavit on this blank should be careful to fill in *all* the blank spaces *as fully as possible.* The paper may be sworn to before any officer authorized to administer oaths.

State of Wisconsin County of Brown

In the Pension Claim No. ________ *of* Clemence Hante widow of Pierre Hante *late a* Private *in Co.* H *of the* 34 *Reg't. of* Wisc Inft *Vols., personally appeared before me, a* ________ *in and for the aforesaid County, duly authorized to administer oaths* Eugene Delforge *aged* 73 *years, a resident of*
Affiant's Name here. Age.

Rosiere *in the County of* Door *and*
Affiant's place of residence here. County here.

State of Wisconsin *who being duly sworn, according to law, states that he was a* Private in Co. H of the 34 Reg't. of Wisc Inft Vols., and was well acquainted with Pierre Haute this applicant for Pension, and
Here affiant should state claimant's name.

know him to be the identical person of that name who served as a Private in Company H 34 Regiment of Wisc Inft Vols.
Here name the State to which Reg't. was accredited, and whether Infantry, Cavalry or Artillery.

THAT THE SAID Pierre Haute while in the line of duty,
Claimant's Name here.

~~incurred~~ was sick and complained of being sick
Here state the wound, injury or disease claimant first incurred.

at or near Memphis State of Tennessee on or about
State at or near what place claimant incurred his disability. Name of State.

the 1 day of May year of 1863 under the following circumstances: Can not say
Day. Month or season. Year. Here state all of the circumstances under which claimant incurred the disability. Write them out as fully as you can.

CLAIMANT ALSO INCURRED ________
Here state the second disability claimant incurred, if he incurred more than one.

at or near ________ State of ________ on or about
State at or near what place claimant incurred his disability. Name of State.

the ____ day of ________ year of ____, under the following circumstances: ________
Day. Month or season. Year. Here state all of the circumstances under which claimant incurred the disability. Write them out as fully as you possibly can.

THIRD DISABILITY ________
Here state the third disability claimant incurred, if he incurred more than two.

ncurred at or near ________ State of ________ on or about
State at or near what place claimant incurred his disability. Name of State.

the ____ day of ________ year of ____, under the following circumstances: ________
Day. Month or season. Year. Here state all of the circumstances under which claimant incurred the disability. Write them out as fully as you possibly can.

OURTH DISABILITY ________
Here state the fourth disability claimant incurred, if he incurred more than three.

urred at or near ________ State of ________ on or about
State at or near what place claimant incurred his disability. Name of State.

the ____ day of ________ year of ____, under the following circumstances: ________
Day. Month or season. Year. Here state all of the circumstances under which claimant incurred the disability. Write them out as fully as you possibly can.

PENSION OFFICE U. S. MAR 31 1899

That claimant's disabilities existed up to and at the date I have no knowlege of tho fact.
Here state "of discharge," if you know his disabilities existed at that time, and if you do not know it, state why you have no knowledge of that fact.

(2)

That the facts are personally known to the affiant by reason of Private Company H. 34 Reg of Wis Infantry — Yes — Can not really recollect.

The affiant should here state his rank, Co. and Reg't. and whether he was with the command at the time the claimant contracted his disability, and if he saw claimant when he was first taken sick, and how he was affected, and in fact, all the circumstances he can possibly remember touching the claimant's incurrence of his disability. In a case of rupture, wound or injury, affiant should state if he saw the same at the time it was incurred or soon after, or at any time during the service, and should, if possible, describe its location and appearance. All the facts known to affiant relative to soldier's medical treatment for his disability while in the service should be stated, giving time and place, if possible.

He further declares that he has no interest in said case and is not concerned in its prosecution.

Postoffice address of affiant is Rosiere, Wis.

Louis Rubens.
Laura Rubens.
If affiant signs by mark, two persons who can write sign here.

Eugene his x mark Delforge
Signature of Affiant.

State of Wisconsin, County of Kewaunee, ss:

Sworn to and subscribed before me this 14th day of March, A. D. 1899, by the above-named affiant , and I certify that I read said affidavit to said affiant , including all the words .... erased, and all the words .... added, and acquainted .... with its contents before ✓ he executed the same. I further certify that I am in nowise interested in said case, nor am I concerned in its prosecution; and that said affiant ✓ is personally known to me, and that ✓ .... credible person.

John B Gigot
Official Signature.

(L. S.)

Notary Public
Official Character.
for the County of Kewaunee
Wisconsin

NOTE.—This can be executed before any officer authorized to administer oaths for general purposes.

SOUTH. DIV.
APR 1 1899
RECEIVED

AFFIDAVIT OF A
COMMISSIONED OFFICER
FIRST (ORDERLY) SERGEANT,
OR A
COMRADE
As to incurrence of ~~Claimant's~~ Soldier's
Disability or Disabilities.

CLAIM OF

Clemence, Widow of Pierre Haute

Late .... in Co. "H", 34th Reg't.
of Wis. Inft Vols

Character of Claim.

Widow's Pension (Act July 14/62)

No. 653,276.

FILED BY
J. B. Cralle & Co.,
Pension Attorneys,
CRALLE BUILDING,
108 C Street, N. W.,
WASHINGTON, D. C.

No. 3.

FOR THE AFFIDAVIT OF AN OFFICER, ORDERLY SERGEANT OR COMRADE,

As to Incurrence of Claimant's Disability or Disabilities.

☞The person making affidavit on this blank should be careful to fill in *all* the blank spaces *as fully as possible.* The paper may be sworn to before any officer authorized to administer oaths, whether he uses a seal or not.

State of Wisconsin County of Brown

In the Pension Claim No. ______ *of* Clemence Haute wid of Pierre Haut

late a Private *in Co.* ______ *of the* 34 *Reg't. of* Wisc Inft *Vols.,*

personally appeared before me, a Justice of the Peace *in and for the aforesaid County, duly authorized to administer oaths* Pierre Pillet *aged* 72 *years, a resident of*

Affiant's Name here. Age.

Schiller *in the County of* Brown and

Affiant's place of residence here. County here.

State of Wisconsin *who being duly sworn, according to law, states that he was a* Private in Co. H of the 34 Reg't. of Wisc Inft Vols.,

and was well acquainted with Pierre Haute ~~this applicant for Pension,~~ and

Here affiant should state claimant's name.

know him to be the identical person of that name who served as a Private in Company H 34 Regiment of Wisc Inft Vols.

Here name the State to which Reg't. was accredited, and whether Infantry, Cavalry or Artillery.

THAT THE SAID Pierre Haute while in the line of duty,

~~Claimant~~'s Name here.

incurred Right Inguinal Hernia

Here state the wound, injury or disease ~~claimant~~ Soldier first incurred.

at or near Memphis State of Tenessee on or about

State at or near what place ~~claimant~~ Soldier incurred his disability. Name of State.

the 5th day of October year of 1862, under the following circumstances: While in the Line of duty

Day. Month or season. Year. Here state all of the circumstances under which ~~claimant~~ Soldier incurred the disability. Write them out as fully as you can.

CLAIMANT ALSO INCURRED ______

Here state the second disability claimant incurred, if he incurred more than one.

at or near ______ State of ______ on or about

State at or near what place claimant incurred his disability. Name of State.

the ______ day of ______ year of ______, under the following circumstances: ______

Day. Month or season. Year. Here state all of the circumstances under which claimant incurred the disability. Write them out as fully as you possibly can.

THIRD DISABILITY ______

Here state the third disability claimant incurred, if he incurred more than two.

incurred at or near ______ State of ______ on or about

State at or near what place claimant incurred his disability. Name of State.

the ______ day of ______ year of ______, under the following circumstances: ______

Day. Month or season. Year. Here state all of the circumstances under which claimant incurred the disability. Write them out as fully as you possibly can.

FOURTH DISABILITY ______

Here state the fourth disability claimant incurred, if he incurred more than three.

incurred at or near ______ State of ______ on or about

State at or near what place claimant incurred his disability. Name of State.

the ______ day of ______ year of ______, under the following circumstances: ______

Day. Month or season. Year. Here state all of the circumstances under which claimant incurred the disability. Write them out as fully as you possibly can.

That claimant's disabilities existed up to and at the date ______

Here state "of discharge," if you know his disabilities existed at that time, and if you do not know it, state why you have no knowledge of that fact.

PENSION
G
U. MAR 1 S.
1898
OFFICE.

(2) 62

That the facts are personally known to the affiant by reason of Being in the said
The affiant should here state his rank, Co. and Reg't. and whether he was with the
Company H – 34 – Reg't Wisc Inf'y Vols and being a
command at the time the claimant contracted his disability, and if he saw claimant when he was first taken sick, and how he was affected, and in fact, al
Camrade of the said Pierre Houle and Knowing Him
the circumstances he can possibly remember touching the claimant's incurrence of his disability. In a case of rupture, wound or injury, affiant should state
well
if he saw the same at the time it was incurred or soon after, or at any time during the service, and should, if possible, describe its location and appearance

All the facts known to affiant relative to soldier's medical treatment for his disability while in the service should be stated, giving time and place, if possible

He further declares that he has no interest in said case and is not concerned in its prosecution.

Postoffice address of affiant is Schiller Brown co Wis.

Alphonse Vickman
Eugene Lacourt
If affiant signs by mark, two persons who can write sign here.

Pierre his X mark Pillet
Signature of Affiant.

State of Wisconsin, County of Brown, ss:

Sworn to and subscribed before me this 23th day of October, A. D. 1897, by the above-named affiant, and I certify that I read said affidavit to said affiant, including all the words erased, and all the words 72 years added, and acquainted Him with its contents before he executed the same. I further certify that I am in nowise interested in said case, nor am I concerned in its prosecution; and that said affiant is personally known to me, and that he is a credible person.

Charles Gerniat
Official Signature.

(L. S.)

Justice of the Peace for Brown co Wis.
Official Character.

NOTE.—This can be executed before any officer authorized to administer oaths for general purposes.

AFFIDAVIT OF A
COMMISSIONED OFFICER
FIRST (ORDERLY) SERGEANT,
OR A
COMRADE,
As to incurrence of Claimant's
Disability or Disabilities.

CLAIM OF

Late .... in Co. .... Reg't.
of .... Vols.

Character of Claim.

No. ....

FILED BY
J. B. Cralle & Co.,
Pension Attorneys,
CRALLE BUILDING,
108 C Street, N. W.,
WASHINGTON, D. C.

State of Michigan
County of Menominee } SS.

In pension claim No.   of Clemmence Houle Widow of Pierre Houle-Joli a Private in Co H-34-Regt of Wis Inf Vols. Personally appeard before me a Notary Public in and for the Aforesaid County Duly authorized to administer oaths. Clemmence Houle Widow of Pierre Houle & Deposes & Says. That she cannot furnish the testimony of an officer & orderly sergeant because she cannot find them and thinks they are dead and further saith not.

Witnessed by
Ruth Garrigan.
Stewart Garrigan

Clemmence her X mark Houle

PENSION
DEC 8 1900
U.S.
OFFICE.

State of Michigan
County of Menominee } SS.

Sworn to and Subscribed before me this 27th day of Nov A.D. 1900 and I certify that I read the Affidavit to said affiant and acquainted her with its contents before She executed the Same. I further certify that I am in nowise interested in said case nor am I concerned in its Prosecution. and that said affiant is personally known to me and that she is a creditable person.

Peter Garrigan.
Notary Public.

PETER GARRIGAN

PENSION
DEC 8 1900
U.S.
OFFICE.

Claim of
Clemence Hautes
Widow of
Pierre Hautes
"H", 34h Wisc

Ctf. No. 491,236.

—

Character of Claim
Widow's Pension (act July 14/62)

—

Filed by
J. B. Cralle & Co.
attorneys
Washington, D. C.

ATTY FILED

B

This form of fee contract is prescribed by the Commissioner of Pensions and approved by the Secretary of the Interior July 8, 1884, under the provisions of the act of Congress approved July 4, 1884.

☞ TO BE EXECUTED IN DUPLICATE WITHOUT ADDITIONAL COST TO CLAIMANT.

Articles of Agreement.

WHEREAS I, Clemence Haute widow of Pierre Haute, Nathan Menominee Co Mich late a P. in Company H" of the 34" Regiment of Wisc Infty Volunteers, War of Rebellion having made application for pension under the laws of the United States—

NOW, THIS AGREEMENT WITNESSETH: That for and in consideration of services done and to be done in the premises, I hereby agree to allow my agents, J. B. CRALLE & CO., of Washington, D. C., the fee of TWENTY-FIVE DOLLARS, which shall include all amounts paid and to be paid for any services in the furtherance of said claim; and said fee shall not be demanded by or payable to my said agents, in whole or in part, except in case of the granting of my pension by the Commissioner of Pensions, and that the same shall be paid to them in accordance with the provisions of Sections 4768 and 4769 of the Revised Statutes, U. S.

Clemence her X mark Haute
Signature of Claimant.

Nathan Mich
Postoffice address.

Ruth Garrigan
Jos Servais
Signature of two witnesses.

State of Mich, County of Menominee, ss:

BE IT KNOWN, that on this the 11th day of August, A. D. 1897 personally appeared Clemence Haute, the above named, who, after having had read over to her in the hearing and presence of the two attesting witnesses, the contents of the foregoing articles of agreement, voluntarily signed and acknowledged the same to be her free act and deed.

[L. S.]

Peter Garrigan
(Official Signature.) Notary Public

ATTORNEYS' ACCEPTANCE,

No portion of which is to be used by the Claimant under any Circumstances.

AND NOW, to wit, this 3" day of September, A. D. 1897, we accept the provisions contained in the foregoing articles of agreement, and will, to the best of our ability, endeavor faithfully to represent the interest of the claimant in the premises, and we hereby certify that we have received from the claimant above named ~~the sum of~~ nothing ~~dollars, and no more; dollars being for fee, and the sum of~~ nothing ~~dollars being~~ for postage and other expenses. And that these agreements have been executed in duplicate without additional cost to the claimant as required by law, in excess of the fee above named, the said agents making no charge therefor.

J B Cralle & Co
Signature of Attorneys.

Witness our hand the year and day above written.

DISTRICT OF COLUMBIA, ss:

Personally came J. B. CRALLE & CO., whom I know to be the persons they represent themselves to be, and who having signed above acceptance of agreement, acknowledged the same to be their free act and deed,

[L. S.]

Bertha S. Dana,
(Official Signature.)

APPROVED FOR ________ DOLLARS, and payable to J. B. CRALLE & CO., of Washington, D. C., the recognized attorneys.

____
Commissioner of Pensions.

PENSION U. S. OFFICE OCT 18 1897

FEE AGREEMENT.

No 653.276

CLAIM OF

Clemence Haute

Pierre Haute widow of

Late .... in Co. K 34 Reg't

of Wisc. Inf. Vols

FOR PENSION.

NATURE OF CLAIM.

Widow's Pension.

FILED BY

J. B. Cralle & Co.,
Pension Attorneys,
CRALLE [illegible]ILDING,
108 C St[illegible], N. W.,
WASHINGTON, D. C.

NOTICE TO CLAIMANT.

This Contract is Permissible under the Law, but not Compulsory.

READ THE FOLLOWING COPY OF THE STATUTE:

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled, * * * * * * *

Sec. 3. That Section 4785 of the Revised Statutes is hereby re-enacted and amended so as to read as follows:

"Sec. 4785. No agent or attorney or other person shall demand or receive any other compensation for his services in prosecuting a claim for pension or bounty land than such as the Commissioner of Pensions shall direct to be paid to him, not exceeding $25; nor shall such agent, attorney or other person demand or receive such compensation, in whole or in part, until such pension or bounty land claim shall be allowed: *Provided*, That in all claims allowed since June 20, 1878, where it shall appear to the satisfaction of the Commissioner of Pensions that the fee of $10, or any part thereof, has not been paid, he shall cause the same to be deducted from the pension and the pension agent to pay the same to the recognized attorney."

Sec. 4. That Section 4786 of the Revised Statutes is hereby amended so as to read as follows:

"Sec. 4786. The agent or attorney of record in the prosecution of the case *may cause to be filed with the Commissioner of Pensions duplicate articles of agreement without additional cost to the claimant, setting forth the fee agreed upon by the parties, which agreement shall be executed in the presence of and certified by some officer competent to administer oaths. In all cases where application is made for pension or bounty land, and no agreement is filed with the Commissioner as herein provided, the fee shall be $10 and no more.* And such articles of agreement as may hereafter be filed with the Commissioner of Pensions are not authorized, nor will they be recognized, except in claims for original pension, claims for increase of pension on account of new disability, in claims for restoration where a pensioner's name has been or may hereafter be dropped from the pension rolls on testimony taken by a special examiner showing that the disability or cause of death, on account of which the pension was allowed, did not originate in the line of duty, and in cases of dependent relatives whose names have been or may hereafter be dropped from the rolls on like testimony, upon the ground of non-dependence, and in such other cases of difficulty and trouble as the Commissioner of Pensions may see fit to recognize them: *Provided*, That no greater fee than $10 shall be demanded, received or allowed in any claim for pension or bounty land granted by special act of Congress, nor in any claim for increase of pension on account of the increase of the disability for which the pension has been allowed: *And provided further*, That no fee shall be demanded, received or allowed in any claim for arrears of pension or arrears of increase of pension allowed by any act of Congress passed subsequent to the date of the allowance of the original claims in which such arrears of pension or of increase of pension may be allowed."

And if in the adjudication of any claim for pension in which such articles of agreement have been or may hereafter be filed it shall appear that the claimant had, prior to the execution thereof, paid to the attorney any sum for his services in such claim, and the amount so paid is not stipulated therein, then every such claim shall be adjudicated in the same manner as though no articles of agreement had been filed, deducting from the fee of $10 allowed by law such sum as claimant shall show that he has paid to his said attorney.

Any agent or attorney or other person instrumental in prosecuting any claim for pension or bounty land who shall directly or indirectly contract for, demand, or receive or retain any greater compensation for his services or instrumentality in prosecuting a claim for pension or bounty land than is herein provided, or for payment thereof at any other time or in any other manner than is herein provided, or who shall wrongfully withhold from a pensioner or claimant the whole or any part of the pension or claim allowed and due such pensioner or claimant, or the land warrant issued to any such claimant, shall be deemed guilty of a misdemeanor, and upon conviction thereof shall for every such offense be fined not exceeding $500, or imprisoned at hard labor not exceeding two years, or both in the discretion of the court.

Approved [illegible]uly 4, 1884.

RECORD & PENSION OFFICE
NOV 18 2108009 1901
WAR DEPARTMENT

3—061.

Western Div.

A. H. H., Ex'r.

Wid., ctf. No. 491,236

Clemence Hante, wid.,

Pierre Hante,

H" 36" Wis. Vol. Inf.

Department of the Interior,

BUREAU OF PENSIONS,

Washington, D. C. Nov. 15, 1901

SIR:

For use in the above-entitled claim for pension please furnish a report from the records of your office as to the presence or absence on or about May and July, 1863 of Eugene Delforge and ~~Joseph Laurent~~ X Privates of Co. H" 34" Wis. Vol. Inf and the station at that time of the said command.

Very respectfully,

J. L. Davenport

Acting Commissioner.

The CHIEF OF THE
RECORD AND PENSION OFFICE,
WAR DEPARTMENT.

0-4

Record and Pension Office,

WAR DEPARTMENT.

U WESTERN S
NOV 20 1901
P DIVISION B

Respectfully returned to the

Commissioner of Pensions.

The rolls show that Eugene Delforge

+ (Joseph Laurent not found on rolls of Co.)

named in the above inquiry was present during the period mentioned ~~except as follows:~~ Rct for May 63 does not show him absent July 63 not on file.

The station of the Co. during said period was as follows:

May 31. + July 1 63 Memphis Tenn.

U. S. NOV 19 1901 DIVISION

By authority of the Secretary of War:

F. C. Ainsworth

~~Colonel U. S. Army,~~ *Chief of Office.*

Per

NOV 18 1901

Washington, D. C., , 189

M.E.G.

West, Div.

3—442.
(Old No. 3—514.)

A.G.T. Ex'r.

Wid. Ctf. No. 491,236

Pierre Hante,

Co. "H", 34" Reg't Wisc. Vol. Inf.

P.O. Dead,

Enlisted Dec. 6, 1862

Discharged Sept. 8, 1863

Disability incurred Summer, 1863

Act July 14, 1862,

Department of the Interior,

BUREAU OF PENSIONS,

Washington, D. C., Nov. 15", 1901

Chief, Army and Navy Survivors' Division:

Please furnish the names and post-office addresses of officers and comrades of Co. "H", 34" Reg't Wis. Vol. Inf., including medical officers of the regiment.

Warner Wilhite

Chief, West Div.

NAME.	RANK.	PRESENT POST-OFFICE ADDRESS.	WITNESS ACCOUNTED FOR BY—
Thomas Theodore Kopff	Asst Surg.	Beaver Dam, Dodge Co., Wis.	
Jean Collin	Pvt.	Robinson, Brown Co., Wis.	
Isidore de Saint Ange	Capt.	New York City, N.Y.	
Adrien Flavion	Corpl.	#423, 11" Street, Green Bay, Wis.	
Adolphe Jadin	Sergt.	Walhain, Kewaunee Co., Wis.	
Victor Noel	Pvt.	Lincoln, Kewaunee Co. Wis.	
Jean Jos. Roner	Corpl.	Brussels, Door Co., "	

Respectfully returned to Chief, Western Division, with the desired information as far as known.

J. C. Kniffin
Record Division.
Chief, Army and Navy Survivors' Division.

NOV 20 1901, 190

RECEIVED
NOV 20 1901
WESTERN DIVI

Army and Navy Survivors' Division.

LIST OF

OFFICERS AND COMRADES,

Co. A, 34 Reg't Wis Inf.

FOR USE IN CLAIM

Wid's Ctfs No. 491,236,

RECORD
NOV
16
1901
DIVISION

Geo. L. Smart, M. D. President,
Springville, Utah.

S. H. Allen, M. D. Vice President,
Provo Utah.

UTAH COUNTY MEDICAL SOCIETY

J. H. SLATER, M. D. SECRETARY AND TREASURER.

SPANISH FORK, UTAH, Dec 4th 1901

Pension Commissioner

Sir — I saw the patient but once and that few days before his death as near as I can remember the symptoms were a barrel shaped c dyspnoea, Curshman's spirals, extreme dilatation of h and no heart compensation. He died a few days later. I can give no particulars as to his previous history and attribute the death to the heart failure

Yours
J. H. Slater

ATTY FILED

6

This form of fee contract is prescribed by the Commissioner of Pensions and approved by the Secretary of the Interior July 8, 1884, under the provisions of the act of Congress approved July 4, 1884.

☞ TO BE EXECUTED IN DUPLICATE WITHOUT ADDITIONAL COST TO CLAIMANT.

Articles of Agreement.

WHEREAS I, Clemence Haute widow of Pierre Haute, Nathan, Menominee Co. Mich late a ---- in Company "H" of the 34 Regiment of Wisc Infty Volunteers, War of Rebellion, having made application for pension under the laws of the United States—

NOW, THIS AGREEMENT WITNESSETH: That for and in consideration of services done and to be done in the premises, I hereby agree to allow my agents, J. B. CRALLE & CO., of Washington, D. C., the fee of TWENTY-FIVE DOLLARS, which shall include all amounts paid and to be paid for any services in the furtherance of said claim; and said fee shall not be demanded by or payable to my said agents, in whole or in part, except in case of the granting of my pension by the Commissioner of Pensions, and that the same shall be paid to them in accordance with the provisions of Sections 4768 and 4769 of the Revised Statutes, U. S.

Clemence her X mark Haute
Signature of Claimant.

Nathan Mich
Postoffice address.

Ruth Garrigan
Jos Servais
Signature of two witnesses.

State of Michigan, County of Menominee, ss:

BE IT KNOWN, that on this the 11 day of August, A. D. 1897, personally appeared Clemence Haute, the above named, who, after having had read over to her in the hearing and presence of the two attesting witnesses, the contents of the foregoing articles of agreement, voluntarily signed and acknowledged the same to be her free act and deed.

[L. S.]

Peter Garrigan
(Official Signature.)
Notary Public

ATTORNEYS' ACCEPTANCE,

No portion of which is to be used by the Claimant under any Circumstances.

AND NOW, to wit, this 3rd day of September, A. D. 1897, we accept the provisions contained in the foregoing articles of agreement, and will, to the best of our ability, endeavor faithfully to represent the interest of the claimant in the premises, and we hereby certify that we have received from the claimant above named ~~the sum of~~ nothing dollars, ~~and no more;~~ ~~dollars being for fee and the sum of~~ nothing ~~dollars being~~ for postage and other expenses. And that these agreements have been executed in duplicate without additional cost to the claimant, as required by law, in excess of the fee above named, the said agents making no charge therefor.

J. B. Cralle & Co
Signature of Attorneys.

Witness our hand the year and day above written.

DISTRICT OF COLUMBIA, SS:

Personally came J. B. CRALLE & CO., whom I know to be the persons they represent themselves to be, and who having signed above acceptance of agreement, acknowledged the same to be their free act and deed,

[L. S.]

Bertha S. Dana,
(Official Signature.)

APPROVED FOR ---- DOLLARS, and payable to J. B. CRALLE & CO., of Washington, D. C., the recognized attorneys.

PENSION OCT 18 1897 U. S. OFFICE

Commissioner of Pensions.

FEE AGREEMENT.

No ....

CLAIM OF

....

....

Late .... in Co. .... Reg't.

of .... Vols.

....

FOR PENSION.

NATURE OF CLAIM.

—o—

FILED BY

J. B. Cralle & Co.,
Pension Attorneys,
CRALLE BUILDING,
108 C Street, N. W.,
WASHINGTON, D. C.

NOTICE TO CLAIMANT.

This Contract is Permissible under the Law, but not Compulsory.

READ THE FOLLOWING COPY OF THE STATUTE:

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled, * * * * *

Sec. 3. That Section 4785 of the Revised Statutes is hereby re-enacted and amended so as to read as follows:

"Sec. 4785. No agent or attorney or other person shall demand or receive any other compensation for his services in prosecuting a claim for pension or bounty land than such as the Commissioner of Pensions shall direct to be paid to him, not exceeding $25; nor shall such agent, attorney or other person demand or receive such compensation, in whole or in part, until such pension or bounty land claim shall be allowed: *Provided*, That in all claims allowed since June 20, 1878, where it shall appear to the satisfaction of the Commissioner of Pensions that the fee of $10, or any part thereof, has not been paid, he shall cause the same to be deducted from the pension and the pension agent to pay the same to the recognized attorney."

Sec. 4. That Section 4786 of the Revised Statutes is hereby amended so as to read as follows:

"Sec. 4786. The agent or attorney of record in the prosecution of the case *may cause to be filed with the Commissioner of Pensions duplicate articles of agreement without additional cost to the claimant, setting forth the fee agreed upon by the parties, which agreement shall be executed in the presence of and certified by some officer competent to administer oaths. In all cases where application is made for pension or bounty land, and no agreement is filed with the Commissioner as herein provided, the fee shall be $10 and no more.* And such articles of agreement as may hereafter be filed with the Commissioner of Pensions are not authorized, nor will they be recognized, except in claims for original pension, claims for increase of pension on account of new disability, in claims for restoration where a pensioner's name has been or may hereafter be dropped from the pension rolls on testimony taken by a special examiner showing that the disability or cause of death, on account of which the pension was allowed, did not originate in the line of duty, and in cases of dependent relatives whose names have been or may hereafter be dropped from the rolls on like testimony, upon the ground of non-dependence, and in such other cases of difficulty and trouble as the Commissioner of Pensions may see fit to recognize them: *Provided*, That no greater fee than $10 shall be demanded, received or allowed in any claim for pension or bounty land granted by special act of Congress, nor in any claim for increase of pension on account of the increase of the disability for which the pension has been allowed: *And provided further*, That no fee shall be demanded, received or allowed in any claim for arrears of pension or arrears of increase of pension allowed by any act of Congress passed subsequent to the date of the allowance of the original claims in which such arrears of pension or of increase of pension may be allowed."

And if in the adjudication of any claim for pension in which such articles of agreement have been or may hereafter be filed it shall appear that the claimant had, prior to the execution thereof, paid to the attorney any sum for his services in such claim, and the amount so paid is not stipulated therein, then every such claim shall be adjudicated in the same manner as though no articles of agreement had been filed, deducting from the fee of $10 allowed by law such sum as claimant shall show that he has paid to his said attorney.

Any agent or attorney or other person instrumental in prosecuting any claim for pension or bounty land who shall directly or indirectly contract for, demand, or receive or retain any greater compensation for his services or instrumentality in prosecuting a claim for pension or bounty land than is herein provided, or for payment thereof at any other time or in any other manner than is herein provided, or who shall wrongfully withhold from a pensioner or claimant the whole or any part of the pension or claim allowed and due such pensioner or claimant, or the land warrant issued to any such claimant, shall be deemed guilty of a misdemeanor, and upon conviction thereof shall for every such offense be fined not exceeding $500, or imprisoned at hard labor not exceeding two years, or both [illegible] the discretion of the court.

Approved [illegible]ly 4, 1884.

No Revenue
stamps required.

Western Div.

A.G.A. Ex'r.

Wid. Ctf. No. 491,236,
Clemence Hauté, wid.
Pierre Hauté,
Co. "H" 34" Reg't Wisc. Vol. Inf.
Act July 14, 1862,

Address your reply to the COMMISSIONER OF PENSIONS with return of this letter.

3–1852.

Department of the Interior,

BUREAU OF PENSIONS,

Washington, D. C., Nov. 15, 1901,

WESTERN DEC 11 1901 DIVISION

Sir,

Relative to your testimony in the above-cited claim, you are requested to furnish this Bureau with an additional statement giving a full clinical history of the soldier's last illness, showing the duration thereof and all symptoms of disease manifested, and the immediate and remote cause, and mode, of death.

PENSION DEC 10 1901 U. S. OFFICE

Your early answer will be appreciated,

Very respectfully,

J. L. Davenport
Acting Commissioner,

Dr. J. H. Slater,
Spanish Fork City,
Utah,

Yeates

[3—218 a.]

Yeates Ex'r.

No. 653276

8/22
8/24

Act of June 27, 1890.

Clemence Haute

Nathan, Mich

Wid

Pierre Haute

H. 7 34 Wis. Inf

Died at

May 7, 1896

No other claim.

May 24, 1897 Buckley
Clerk.

Numerical No.

Application filed: Apr. 29, 1897.

Attorney: J. B. Cralle & Co

P. O. City

atty dieed

(5487—20,000.)

ch. 13/90. A. [illegible] for full report.

In. CMY.

Ill. Jan. 22/98. atty. for record ev. date of death, clmt's pleas

Iowa. & prior mgs. copy of desert. record, prior claim by soldier prior & sub service, ev. as to any other prior mge. of soldier & and any mge. of clmt prior to 1870.

CMY.

Wis.

Minn. Slip to Hon. Commissioner

Nebr. of Pensions to have claim

Kans. made special. Dec. 14. 98.

Nev. G. S. H. Exr

Colo. Not made special. Dec.

Cal. 15. 98. G. S. H. Exr.

Oregon. Atty. Cralle called for cor-

Ind. Ty. rect name under which

N. Mex. Claimt. married soldier and

Dakota. explanation of discrepancy

Wash. under oath. Jan. 7. '98. G. S. H.

Utah. Atty. Cralle again for correct name under which claimt. married soldier and explanation of discrepancy, under oath; affidavit recently filed not satisfactory because signed "Clemence Accour", April 13. '99. G. S. H. Exr.

No.........

[3—216.]

3

Bunsley Ex'r. INVALID.

No. 639645

Acts of July 14, 1862, and March 3, 1873.

Pierre Haute

P. O. Bagley

Menominee Co. Mich

Service: Pri. Co. A. F 34' Wis. Inf.

Enlisted: Nov. 24, 1862.

Discharged: Sep. 8, 1863.

M.O.

Application filed: Feb. 11, 1888.

Alleges: Rupture r. side

BOARD OF RE-REVIEW DEC 1888

REVIEW DEC 21 1888

Re-enlisted:

~~4/411~~

4/923

Attorney: Geo. E. Lemon

P. O. Wash. D. C

Recognized. Contract.

ATT'Y FILED.

Cert. of Dis. Searched for , 18 .

B

(1069—14,000.)

notified — 3 — 6 — 88

IND. Mch 19. 88. A.G. called upon L.A.G.

Cy ord June 9/88. Marinette. Wis.

Order to ILL. Claimt through Atty Lemon.

IOWA. July 6, '88. Aty. for oer.

To P.M. for Standing

Aug. 1, '88. To P.M. Sugar-

bang, Wis, for standing of

Collins or Cullin.

WIS. Nov. 3, '88 atty for a.o.

MINN. of Collin or Cullin.

NEBR. P.M. for standing of

Dr Kopff

KANS. Nov. 27, '88. To P.M.,

NEV. Janet, Wis. for

COLO. John Collin.

CAL.

OREGON.

IND. TY.

N. MEX.

DAKOTA.

WASH.

UTAH.

No.__________

[3—218.]

~~[illegible]~~ Ex'r

Wid. ~~Orig~~ No. ~~653276~~

Acts of July 14, 1862, and March 3, 1873.

4/123 Ctf 491.236

Clemence Haute

Nathan, Mich

Wid

Pierre Haute

H 34 Wis Inf

Died at Nathan, Mich

May 7-96

other claim.

I. A. 417889

July 19, 1897. C.

Clerk.

Application filed: July 10, 1897

Attorney: J. B. Cralle & Co

P. O. City

atty filed

MB

~~Ev. of July 20/97~~

IND. Jan. 13/98. A. G. for full
ILL. report. cwy.
IOWA. Jan. 22/98. Attys for
~~record ev. date & cause of~~
~~death, identity of. as & prior~~
~~mges. copy of acct. record~~
~~prior claim by soldier, prior~~
~~& sub service, ev. as to any other~~
WIS. ~~prior mge. of soldier. & any~~
MINN. ~~mge. of clmt. prior to 1870.~~
cwy.
NEBR.
KANS. Atty. Craller & Co. for ev-
NEV. idence as to origin, treat-
COLO. ment in service, and
CAL. continuance of disease
OREGON. of heart, the fatal disease.
Dec. 14, 98, G.S.H. Exr.
IND. TY.
N. MEX. Apl. 24, 1900. Attys C & Co
for origin & cont
DAKOTA. heart disease. cwy

May 20, 1901, Attys,
Cralle & Co. given P.O.
WASH. add. of clmt —
UTAH. ~~Record ev, &c. death~~ —
full ~~clinical history~~
~~last illness~~ — clmt
to state name last
physician, ARK

Dec. 10/98 and - adv - date of dth.
N. K.

APR 19 1900 Regn. of Inc. to widow & M. B. Stevens & Geo. " attys - J.R.C.

(3-230.)

INVALID. (Series) ✓

Cert. No. 417889

Name, Pierre Haute.

Rank, Pvt. ; Service, Co. H. 34. Wis. Vol. Inf.

Agency. Original Roll: Detroit.
Transf'd ,18 ,to
" ,18 ,to

Issue. 1 Class. Orig. Entered Feb 8 85.

Issued Jan. 7, 1889
Mailed " 11, 1889
Rate and Period, $ 8, from Feb. 11, 1888
✓
Deductions:
Disability: Rt. ing. hernia.

Issue. 2 Class. Inc Entered 4/10

Issued Oct 20, 1890
Mailed 25, 1890
Rate and Period, $ 12 ~~from~~ June 4, 1890
✓
Deductions:
Disability: Right inguinal hernia (complicated)

(14217—25 M.) 6—011

Issue. Class. Entered
Issued ,18
Mailed ,18
Rate and Period, $ from ,18
Deductions:
Disability:

Issue. Class. Entered
Issued ,18
Mailed ,18
Rate and Period, $ from ,18
Deductions:
Disability:

Accrued Pensions,
ACT OF MARCH 2, 1895.
Accrued - Pension Certificate and Order issued Apr. 6 1900
(Pen. Ctf. herewith)
Payable to Wid.
Mailed Apr. 10 1900

INDORSEMENTS.

See wid. Cf. 491 236

DROPPED FROM ROLLS
MAY 19 1896
PENSIONER DEAD.

June 26/96 Acc'd & new law blanks sent to Peter Garrigan

DROPPED
Nov 11 1909
Auditor advised of Death.
NOV 18 1909 N.H.H

Albert

[Act of June 27, 1890]

(3—232.)

J

No. 491.236

Clemence Haute
Widow of
Pierre Haute

Rank Pri
Company H.
Regiment 34" Wisc Vol Inft

Rate per Month $8
Commencing Apr 29" 1897
Ending

Detroit Agency.
Issued Apr 6, 1900
Mailed " 10", 1900
Fee, $10

✓

(38-20,000.)

DEAD.

Dec 5 '04.
J. B. Cralle & Co.
wid gen law aband.
B.F.C.

Feby 1-06 J.B. Cralle & Co. death cause due to service in cords. g.l. W.A.B.

Feby 16/07 J.B. Cralle & Co wid. g.l. aband. B.F.C.

J 30 31

639.645

War Department,

ADJUTANT GENERAL'S OFFICE,

Washington, Apl 5', 1888.

Respectfully returned to the Commissioner of Pensions.

Pierre Hantz, a private of Company H, 34 Regiment Wisconsin Volunteers, was enrolled on the 24 day of November 1862, at Green Bay, 9 mos and is reported: on Roll of Co dated Dec 31, 62 present, same to June 30th 1863. M.O. with Co. Sept 8th 1863 at Milwaukee Wisc.

Records of this Office furnish no evidence of disability.

R. C. DRUM,
Adjutant General.

By W. Evans

(2.)

C 4/10/26

Po

3-019.

SAR. Ex'r. **Department of the**

Pension Br

No. 639.645
Prime Haute.
Pvt. H. 34. Wis Inf.

BUREAU OF PENSIONS,

March 19, 1888.

SIR:

I have the honor to request that you will furnish from the records of the War Department a full Report as to the service, disability, and hospital treatment of Prime Haute., who, it is claimed, enlisted Nov. 24, 1862, and served as private in Co. H, 34 Reg't Wis. Inf.; also in Co.

and was discharged at Milwaukee Wis., Sep 8, 1862.

While serving in Co. H. 34 Reg't Wis. Inf. he was disabled by rupture of right side from falling over a stump at night.

also

and was treated in hospitals of which the names, location, and dates of treatment are as follows:

Regimental Surgeon

Very respectfully,

John C Black.
Commissioner

410/26

The Adjutant General, U. S. Army.

(10451–75 M.) o 6-002.

WESTERN,
TO EXAMINER,
MAY 24 1888

March 19. 1888.

RECEIVED.
APR 7 1888

Western Division.

FIRST CALL

On Adjutant General, U. S. A.

Claim No. 639.675

Prine Haute.

Pvt. H. 24. Wis. Inf.

U. S. PENSION OFFICE.
APR 5 1888

[3-012 a.]

Act of June 27, 1890.

CC

DECLARATION FOR WIDOW'S PENSION.

CC

LAW DIVISION RECEIVED APR 30 1897

To be executed before a Court of Record or some officer thereof having custody of its seal, a Notary Public or Justice of the Peace, whose official signature shall be verified by his official seal, and in case he has none, his signature and official character shall be certified by a Clerk of a Court of Record, or a City or County Clerk.

STATE OF Michigan } ss:
COUNTY OF Menominee. }

On this 16th day of July A.D., A. D. one thousand eight hundred and ninety-Six, personally appeared before me, a Justice of the Peace of the Township of Nadeau within and for the county and State aforesaid Clemence Haule, aged 55 years, a resident of the Town of Holmes, county of Menominee, State of Michigan, who, being duly sworn according to law, declares that she is the widow of Pierre Haule, who enlisted under the name of Pierre Haule at , on the day of A. D. 18 , in Company H. 34 Regt Wis Inf. (Here state rank, company, and regiment, if in Military service, or vessel, if in Navy.)

and served at least ninety days in the late War of the Rebellion, in the service of the United States; who was HONORABLY DISCHARGED , and died May 7th 1896 (The cause of death need not be stated.)

That the soldier was not in the Military or Naval service of the United States except as above stated. (If any other service it should be stated in full.)

That she was married under the name of Clemence Lecourt, to said Pierre Haule, on the 25 day of March 1872 by G. E. Mutille, at Green Bay Wis. there being no legal barrier to said marriage. ses of Both dissolved By Death Divorce (If there was a former marriage of claimant or her husband, state it here and how dissolved.)

That she has not remarried since the death of the said Pierre Haule (Name of soldier or sailor.)

~~That she is without other means of support than her daily labor. That names and dates of birth of all the children now living under sixteen years of age of the soldier are as follows:~~

~~, born , 18 , born , 18~~
~~, born , 18 , born , 18~~
~~, born , 18 , born , 18~~

~~That she has heretofore applied for pension and the number of her former application is~~

That she makes this (Be careful to fill this part of the blank correctly.) declaration for the purpose of being placed on the pension roll of the United States under the provisions of the Act of June 27, 1890.

She hereby appoints J. B. Cralle, of Washington Dis ~~State~~ of Columbia, her true and lawful attorney to prosecute her claim and receive a fee of $. That her post-office address is Nathan Michigan county of Menominee, State of Michigan

Clemence her X mark Haule
(Claimant's signature.)

Attest: (1) Ruth Garrigan
(2) Delia Bradley

FILED

(2007—10,000.) 6—586

Also personally appeared Emma Liberty, residing at Nathan Mich, and Edward Marsh, residing at Nathan Mich, persons whom I certify to be respectable and entitled to credit and who, being by me duly sworn, say they were present and saw Clemence Haule claimant, sign her name (or make her mark) to the foregoing declaration; that they have every reason to believe from the appearance of said claimant and an acquaintance with her of four years and Six years, respectively, that she is the identical person she represents herself to be; and that they have no interest in the prosecution of this claim

LAW DIVISION
RECEIVED
APR 30 1897

(1) Emma Liberty

(2) Ed Marsh

(Signatures of witnesses.)

Sworn to and subscribed before me this Seventh day of August A. D. 1896, and I hereby certify that the contents of the above declaration, etc., were fully made known and explained to the applicant and witnesses before swearing, including the words ________ erased, and the words ________ added; and that I have no interest, direct or indirect, in the prosecution of this claim.

Peter Garrigan
(Signature.)

Justice of the Peace
(Official character.)

The Act of June 27, 1890, requires, in widow's case:

1. That the soldier served at least NINETY DAYS in the War of the Rebellion and was HONORABLY DISCHARGED.
2. Proof of soldier's death (death cause need not have been due to Army service).
3. That widow is "without other means of support than her daily labor."
4. That widow was married to soldier prior to June 27, 1890, date of the Act.
5. That all pensions under this act commence from date of receipt of application in Pension Bureau.

Act of June 27, 1890.

CC Claim (3—012a.) B.K.

WIDOW'S APPLICATION.

Claimant, Clemence ~~Haute~~ Haule

Soldier, Pierre Haule

Service, Pvt. Co. K + I. 34th Regt. Mich. Inf.

U.S. PENSION OFFICE
APR 29 1897

Address: Nathan
Menominee Co
Michigan

Attorney: J. B. Cralle and Co.

Address 610 "F" St. N.W.
Washington, D.C.

LAW DIVISION
RECEIVED
APR 30 1897

6—586

DECLARATION FOR ORIGINAL INVALID PENSION.

☞ MUST be executed before a COURT OF RECORD, or some officer thereof having custody of its seal.

STATE OF Michigan }
COUNTY OF Menominee } ss:

On this 1st day of February A. D. one thousand eight hundred and eighty 8 personally appeared before me Clerk of Circuit Court of the County of Menominee Mich a court of record within and for the County and State aforesaid, Pierre Haute (Name of Claimant.), aged 60 years, a resident of Bagley ~~Menominee~~, County of Menominee State of Mich (Give Town, County, and State; and if you reside in a city where streets are named and houses are numbered, give name of street and number of house. If you reside in the country, state about how many miles from nearest Post-Office), who, being duly sworn according to law, declares that he is the identical Pierre Haute (Name of claimant.) who entered service under the name of Pierre Haute (Name of claimant) on or about the 24" day of Nov 1862 as Pvt (Give rank.) in company "H" of the 34" regiment of Wisc Vols. commanded by Capt. I. de Saint Ange (Name of Company's Commander. If upon any General's Staff, state that fact.) and was DISCHARGED at Milwaukee Wisc, on or about the 8" day of Sept, 1863, by reason of expiration of term of service that his personal description is as follows: Age, 60 years; height, 5 feet 9 inches; complexion, dark; hair, dk brown; eyes, gray. That while a member of the organization aforesaid, in the service and in the line of his duty at Memphis, in the State of Tenn, on or about the ____ day of July, 1863, he incurred rupture of right side from falling over a stump at night. (Here state name or nature of disease, or the location of the wound or injury. If disabled by disease, state fully its causes; if by wound or injury, the precise manner in which received.)

That he was treated ~~in hospitals as follows:~~ by Regt Surgeon. (Here state the names or numbers and the localities of all hospitals in which treated, and the dates of treatment.)

That he has not been employed in the military or naval service otherwise than as stated above (Here state what the service was, whether prior or subsequent to that stated above, and the dates at which it began and ended.)

That since the 9" day of Sept (Give date of last discharge from the service.), A. D. 1863, he has not been employed in the military or naval service of the United States. That since leaving the service ~~this applicant has resided in the~~ ~~of~~ (Town or City.), ~~in the State of~~ ~~and~~ his occupation has been that of a farmer That prior to his entry into the service above named he was a man of good, sound, physical health, being when enrolled a farmer That he is now ____ (Wholly or in part.) disabled from obtaining his subsistence by manual labor by reason of his injuries above described, received in the service of the United States; and he therefore makes this declaration for the purpose of being placed on the invalid pension roll of the United States.

He hereby appoints, with full power of substitution and revocation,

GEORGE E. LEMON,

of Washington, D. C., his true and lawful Attorney, to prosecute his claim. That he has never (If previous application has been made, give number of claim, if possible.) received nor applied for a pension. That his Post-office Address is Bagley county of Menominee, State of Mich.

his
Pierre X Haute
mark
(Claimant's Signature.)

Two witnesses to Claimant's Signature sign here:

(1) F. J. Pommerville
(2) Frank Sauvie

This Blank is prepared by GEORGE E. LEMON, of Washington, D. C., and is exclusively for his Use.

Also personally appeared Frank E. Sancier, residing at City of Menominee, and F. J. Pommier, residing at the Same Place, persons whom I certify to be respectable and entitled to credit, and who, being by me duly sworn, say they were present and saw Pierre Haute (Name of Claimant.) the claimant mak his Mark (Sign his name or make his mark.) to the foregoing declaration; that they have every reason to believe, from the appearance of said claimant and their acquaintance with him, that he is the identical person he represents himself to be; and that they have no interest in the prosecution of this claim.

(1) F. J. Pommier

(2) Frank E. Sancier

(Signatures of witnesses to identity of applicant.)

Two witnesses to signatures of identifying witnesses sign here, when either of them signs by mark:

(1)

(2)

SWORN TO AND SUBSCRIBED before me this 1st day of February A. D. 1885, and I hereby certify that the contents of the above declaration, &c. were fully made known and explained to the applicant and witnesses, before swearing thereto, ~~including the words~~ (If any words have been erased in the application, enter them here.) ~~erased, and the words~~ (If any words have been added in place of any erased, enter them here.) ~~added~~; and that I have no interest, direct or indirect, in this claim, and am not concerned in its prosecution.

[L. S.]

Charles Lince
(Signature.)

Clerk of Circuit Court
Menominee Co. Mich
(Official character.)

☞ **THE OFFICER BEFORE WHOM THIS DECLARATION IS EXECUTED MUST BE SURE AND NOTE IN HIS CERTIFICATE ALL ERASURES AND INTERLINEATIONS, AS INDICATED ABOVE.**

☞ This application **MUST** be acknowledged by the claimant and identifying witnesses before a Judge, Clerk, or Deputy Clerk of a Court of Record under the seal of the Court; if not so acknowledged, it will be **WORTHLESS.**

ONE EXCEPTION.—Where an applicant resides more than twenty-five miles from any place at which a court is holden, upon being notified of the fact I will endeavor to have a suitable person designated, under an authority given to the Commissioner of Pensions for that purpose, before whom the declaration may be made.

☞ As this may reach the hands of some persons unacquainted with this House, we append hereto, as specimens of the testimonials in our possession, copies of letters from several gentlemen of political and military distinction and widely know throughout the United States:

House of Representatives,
Washington, D. C., *March* 1, 1879.

We, the undersigned, having an acquaintance with Captain George E. Lemon for the past few years, and a knowledge of the systematic manner in which he conducts his extensive business, and of his reliability for fair and honorable dealing connected therewith, cheerfully commend him to claimants generally.

A. V. RICE,
Chairman, Committee on Invalid Pensions, House Reps.
W. F. SLEMONS, Member of Congress,
Second Congressional District of Ark.
W. P. LYNDE, Member of Congress,
Fourth Congressional District of Wis.
R. W. TOWNSHEND, Member of Congress,
Nineteenth Congressional District of Ill.

Belvidere, Illinois, *October* 24, 1875.

I take great pleasure in recommending Captain George E. Lemon, now of Washington, D. C., to all persons who may have claims to settle or other business to prosecute before the Departments at Washington. I know him to be thoroughly qualified, well acquainted with the laws and with Department rules in all matters growing out of the late War, especially in the Paymaster's and Quartermaster's offices. I have had occasion to employ him for friends of mine, also, in the soliciting of patents, and have found him very active, well informed, and successful. As a gallant officer during the war, and an honorable and successful practitioner, I recommend him strongly to all who may need his services.

S. A. HURLBUT, Member of Congress,
Fourth Congressional District, Illinois,
Late Major-General U. S. Vols.

House of Representatives, Washington, D. C.,
March 3, 1875.

From several years' acquaintance with Captain George E. Lemon, of this city, I cheerfully commend him as a gentleman of integrity and worth, and well qualified to attend to the collection of bounty and other claims against the Government. His experience in that line gives him superior advantages.

W. P. SPRAGUE, Member of Congress,
Fifteenth Congressional District of Ohio.
JAS. D. STRAWBRIDGE, Member of Congress,
Thirteenth Congressional District of Penn.

Executive Mansion, Boise City,
Idaho Territory, *September* 5, 1876.

Captain George E. Lemon, Attorney and Agent for the collection of war claims at Washington City, is a thorough, able, and exceedingly well-informed man of business, of high character, and entirely responsible. I can assure all having war claims requiring adjustment that their interests cannot be confided to safer hands.

M. BRAYMAN,
Governor of Idaho and late Maj.-Gen. Vols.

☞ Any person desiring information as to my standing and responsibility will, on request, be furnished with a satisfactory reference in his vicinity or Congressional District.

I REQUEST POSTAL STAMPS FOR REPLIES AND FOR RETURN OF PAPERS.

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of

BUREAU
FEB 1[illegible]
OF PENSIONS

INVALID.

CLAIM FOR PENSION.

ORIGINAL.

Pierre Haute Applicant.

Pvt Co. "H" 34 Regt.

Wisc Vols

Enlisted 24 Nov, 1862

NO SUB AGENT.

Discharged 8th Sept, 1863

FILED BY
GEORGE E. LEMON,
ATTORNEY AND COUNSELOR AT LAW,
Offices, No. 615 Fifteenth Street N. W.,
P. O. Drawer 325, Washington, D. C.

(3-560.)

APPLICATION FOR ACCRUED PENSION.

(WIDOWS.)

State of Michigan , **County of** Menominee , ss:

On this Sixteenth day of July A.D. , 1896, personally appeared Clemence Houle , who, being duly sworn, declares that she is the lawful widow of Pierre Houle , deceased; that he died on the 7th day of May A.D. , 1896; that he had been granted a pension by Certificate No. 417889 which is herewith returned (or if not, state why not) ; that he had been paid the pension by the Pension Agent at Detroit-Mich up to the 4 day of March A.D. , 1896; after which date he had not been employed or paid in the Army, Navy, or Marine service of the United States, except ; that she was married to the said Pierre Houle on the 25th day of March , 1872, at Green Bay , in the State of Wisconsin ; that her name before said marriage was Clemence Acour ; that she had ~~(or had not)~~ been previously married; that her husband had ~~(or had not)~~ been previously married; that she hereby makes application for the pension which had accrued on aforesaid certificate to the date of death; and that her residence is No. Street, ~~City~~ village of Nathan , County of Menominee , State of Michigan , and her post-office address is Nathan Menominee County Mich.

(*Widow's signature.*) Clemence her x mark Houle

Also personally appeared Joseph Servais , residing at Carney Michigan , and Joseph Sherry , residing at Nadeau Mich , who, being duly sworn, say they were present and saw Clemence Houle , ~~sign her name~~ (make her mark) to the foregoing declaration; that they know her to be the lawful widow of Pierre Houle , who died on the 7th day of May , 1896; and that their means of knowledge that said parties were husband and wife, and that the husband died on said date, are as follows: the said Jos Sherry is a son of the said Clemce Houle they saw & recognized his dead Body to wit: the dead Body of Pierre Houle the Husband of the within Claimant.

(*Signature of witnesses.*) Jos. Servais
Joe Sherry

Sworn to and subscribed before me on this 16 day of July A.D. , 1896, and I certify that the affiants are reputable persons; that they know the contents of their depositions, and that their statements are entitled to full faith and credit. I further certify that I have no interest, direct or indirect, in the above claim.

(*Signature.*) Peter Garrigan

(*Official character.*) Justice of the Peace.

0-2

Aml Je.

State of Michigan, County of Menominee, ss:

I, Henry J Moessner, Clerk of the Circuit Court of the County aforesaid, do hereby certify that Peter Garrigan is a Justice of the Peace duly commissioned and qualified; that his commission was dated on the 4 day of July, 1893 and will expire on the 4 day of July, 1897 and that his signature within written is genuine.

GIVEN under my hand and the seal of said Court this 20 day of July, 1896

Henry J Moessner
Clerk.

Evidence upon the following points should accompany the application for accrued pension:

1st. Proof of marriage.

2d. Proof that the widow and the pensioner had never been married before, or if they had been married to other persons, proof of the death of such person, or proof of divorce.

Proof of marriage should be made by copies of any public records of that fact if in existence; if this can not be had, then the sworn statement of the clergyman or magistrate who performed the ceremony, or of two persons who were present at the ceremony; if this proof can not be made, then the evidence of length of time parties lived together as husband and wife and the testimony of two or more neighbors who know the parties lived together as husband and wife and the testimony of two or more neighbors who know the parties lived together and were recognized as husband and wife.

Proof should be made in the order named above, or satisfactory reason given why the best evidence can not be furnished.

This application should be properly executed and forwarded to the Commissioner of Pensions.

It is desirable that the witnesses should be able to write their own names; if not, their marks should be witnessed.

(3—560.)

APPLICATION FOR ACCRUED PENSION.

(WIDOWS.)

Certificate No. 417 889

Pensioner Pierre Houle

PENSION U.S. OFFICE JUL 29 1896

LAW DIVISION. B. JUL 31 1896 RECEIVED

Execute this paper before some officer having a seal.

858

WIDOW'S CLAIM FOR PENSION.

STATE OF Michigan } ss:
COUNTY OF Menominee }

ON THIS 22 day of June, 1897 personally appeared before me, a Notary Public of a Court of Record in and for the County and State aforesaid Clemence Haute, a resident of Nathan in the County of Menominee, and State of Michigan aged 35 years, who, being duly sworn, makes the following declaration, in order to obtain the Pension provided by the Act of Congress.

That she is the widow of Pierre Haute who was a Private in Company H commanded by in the 34th Regiment of Wisc Inft Vol in the War of 1861; that her maiden name was Clemence Hecour and that she was married to said Pierre Haute on or about the 25 day of March 1872, at Green Bay in the County of Brown and State of Wisconsin by W E Matille and that she knows of no record evidence of said marriage Except Certificate Herewith Enclosed.

SHE FURTHER DECLARES that said Pierre Haute her husband, died at Nathan, in the State of Michigan, on or about the 7 day of May, 1896, of Heart Disease Complicated with Emphysema.

She also declares that she has remained a widow ever since the death of said Pierre Haute and that she has not in any manner been engaged in, or aided or abetted the rebellion in the United States; and she hereby appoints **J. B. CRALLE & CO.** of Washington, D. C., as her lawful Attorneys, with power of substitution, and authorizes them to present and prosecute this claim. ~~The following the name, date of birth, and place of residence of all the children of her deceased husband who were under sixteen years of age at the time of his death:~~

My Postoffice address is Nathan, Menominee Co. Mich

John Straik
Lui Agustin
(If Claimant signs by mark, two persons who can write sign here.)

Clemence her X mark Haute
(Signature of Claimant.)

Also persoually appeared before me a notary Public in and for Menominee County Mich Peter Garrigan John Straik and Lui Augustin residents of Nathan Menominee County, and State of Michigan to me well known as credible persons, who being duly sworn, declare that they were present and saw said Clemence Haute sign her name to the foregoing declaration, and that they have every reason to believe, from the appearance of said applicant, and their acquaintance with her, that she is the identical person she represents herself to be, and know that said deceased recognized said applicant as his lawful wife, and that she was so recognized by the community in which they resided; and that they have no interest, direct or indirect, in the prosecution of this claim.

Peter Garrigan
Notary Public

Signature of Witnesses: { John Straik
Lui Agustin

ATTY. FILED

Sworn to and subscribed to before me, this 22 day of June 1897: and I hereby certify that I have no interest, direct or indirect, in the prosecution of this claim. And that the contents of the above were made known and explained to applicant and witnesses before signing.

(SEAL.)

Peter Garrigan, Notary Public, Carney, Michigan.

Peter Garrigan
(Official Signature)
Notary Public

Note.—If there is any record evidence of marriage, insert, (except that of which a true copy is hereunto annexed,) and append a certificate of the record accordingly. The cause of death must be specified in the second clause of the declaration. The declaration and evidence of identity must be made before a Court of Record, or before some officer of such Court duly authorized to administer oaths, and having custody of its seal, which must be attached.

Wid 653,276 J.
~~[illegible]~~
S. Ctf. 417889

WIDOW'S

Claim for Pension.

Mrs Clemence Haute
Widow of Pierre Haute
Late H in Co. 34 Reg't.
of Wisc. Inf. Vols.

PENSION
U.S.
JUL 10 1897
OFFICE.

FILED BY
J. B. Cralle & Co.,
Pension Attorneys,
CRALLE BUILDING,
108 C Street, N. W.,
WASHINGTON, D. C.

GENERAL AFFIDAVIT.

State of Michigan, County of Menominee

In the matter of Pierre Houte late a in Co. H of the 34 Reg't. of Wisc Vols., for Increase and Rerating

On this 22nd day of July A. D., 1887, personally appeared before me, a Justice of the Peace in and for the aforesaid County, duly authorized to administer oaths Furman Vanderwelt aged 25 years, a resident of Bagley in the County of Menominee and State of Michigan whose Postoffice address is Bagley and well known to me to be reputable and entitled to credit, and who, being duly sworn, declared in relation to aforesaid case as follows:

[NOTE.—Affiant should state his means of knowing the facts to which he testifies.]

I have been personally acquainted with Pierre Houte about seven (7) years. I worked for him almost all the time I know that he has never during this time been able to do any manual labor and is not able now to do any even the light work that he used to do. I am no relation to Pierre Houte.

And further declare that I have no interest in said case & am not not concerned in its prosecution.

Fred LeGault
James Champion
(If Affiant signs by mark, two persons who can write sign here.)

his
Furman x Vanderwelt
mark
(Signature of Affiant.)

State of Michigan, County of Menominee ss:

Sworn to and subscribed before me this day by the above-named affiant, and I certify that I read said affidavit to said affiant, including the words ---------- erased, and the words ---------- added, and acquainted him with its contents before he executed the same. I further certify that I am in nowise interested in said case, nor am I concerned in its prosecution; and that said affiant is personally known to me, and that he is a creditable person.

[L. S.]

James Champion
(Official Signature.)

Justice of the Peace
(Official Character.)

I, ---------- Clerk of the County Court, in and for aforesaid County and State, do certify that ---------- Esq., who hath signed his name to the foregoing declaration and affidavit, was at the time of so doing ---------- in and for said County and State duly commissioned and sworn; that all his official acts are entitled to full faith and credit, and that his signature thereunto is genuine.

Witness my hand and seal of office, this ---------- day of ---------- 188 .

[L. S.]

Clerk of the ----------

This affidavit may be sworn to before any officer authorized to administer oaths. If executed before a Notary or Justice, however, the certificate of Clerk of Court should be attached, showing official capacity of said Notary or Justice, if such certificate be not already on file.

ADDITIONAL EVIDENCE.

CLAIM OF

Late ---------- in Co. ---------- Reg't.

of ---------- Vols.

FILED BY

J. B. CRALLE,

Cralle Building,

108 C Street, Northwest,

WASHINGTON, D. C.

PENSION OFFICE
AUG 16 1889

GENERAL AFFIDAVIT.

State of Michigan, County of Menominee

In the matter of Pierre Houte late a in Co. H of the 34th Reg't. of Wisc Vols., for Increase and Rerating

On this 22nd day of July A. D., 1889, personally appeared before me, a Justice of the Peace in and for the aforesaid County, duly authorized to administer oaths Michael W Cox aged 36 years, a resident of Bagley in the County of Menominee and State of Michigan whose Postoffice address is Bagley and well known to me to be reputable and entitled to credit, and who, being duly sworn, declared in relation to aforesaid case as follows:

[NOTE.—Affiant should state his means of knowing the facts to which he testifies.]

I have been personally acquainted with Pierre Houte, nine (9) years & have lived near him the whole time & have seen & known him well. Have worked on the same road often where his team was working & have known that he has never been able to do any manual labor. I was overseer of Highways three years ago & Pierre Houte came to try & work his tax with me on the Highway but I found that he was unable to do so.

I am not any relation to said Pierre Houte, am not interested in any way in his claim, am not of the same nationality & am a disinterested witness.

and I further declare that he has no interest in said case not concerned in its prosecution.

In presence of
James Champion

(If Affiant signs by mark, two persons who can write sign here.)

M W Cox

(Signature of Affiant.)

State of Michigan, County of Menominee ss:

Sworn to and subscribed before me this day by the above-named affiant , and I certify that I read said affidavit to said affiant , including the words erased, and the words added, and acquainted him with its contents before he executed the same. I further certify that I am in nowise interested in said case, nor am I concerned in its prosecution; and that said affiant is personally known to me, and that he is a creditable person.

[L. S.]

James Champion
(Official Signature.)

Justice Of the Peace
(Official Character.)

I, Clerk of the County Court, in and for aforesaid County and State, do certify that Esq., who hath signed his name to the foregoing declaration and affidavit, was at the time of so doing in and for said County and State duly commissioned and sworn; that all his official acts are entitled to full faith and credit, and that his signature thereunto is genuine.

Witness my hand and seal of office, this day of 188 .

[L. S.] Clerk of the

This affidavit may be sworn to before any officer authorized to administer oaths. If executed before a Notary or Justice, however, the certificate of Clerk of Court should be attached, showing official capacity of said Notary or Justice, if such certificate be not already on file.

ADDITIONAL EVIDENCE.

CLAIM OF

Pierre Korte

Late in Co. G 24" Reg't.

of Wis Inft Vols.

Cert #417889
For
Increase and Rerating

OK

FILED BY
J. B. CRALLE,
Cralle Building,
108 C Street, Northwest,
WASHINGTON, D. C.

CLAIMANT'S AFFIDAVIT.

State of Michigan County of Menominee, ss:

In the matter of Clemence Haute widow of Pierre Haute late a Private in Co. H of the 34 Reg't of Wisc Inf. Vols., for

On this 13th day of Sept, A. D., 1898, personally appeared before me, a Notary Public in and for the aforesaid County, duly authorized to administer oaths, Clemence Houte, aged 57 years, a resident of Nathan in the County of Menominee and State of Mich, whose Postoffice address is Nathan Mich and well known to me to be reputable and entitled to credit, and who, being duly sworn, declares as follows:

That I am Clemence Houte widow of Pierre Houte and am ~~is~~ the claimant in the above-mentioned cause, and that I was previously married to John Batiste Charlier who died in Belgium on or about the 24th day of August A.D 1868 the soldier my Husband was previously married to Mary Theresie Miller who was divorced by said soldier on the 29th day of April 1872 the said soldier Pierre Houte made application for a Pension which was granted under Pension certificate no 417889 said Pension Certificate Has been lost since the death of said Pierre Houte it was granted for right Inguinal Hernia and application was made for increase on the 17th day of Sept A.D 1889 which was granted on Oct 20th 1890 at the rate of $12.00 Per month for the same disability which had became aggravated to an extent to preclude the wearing of a truss said disability was claimed and granted for having been contracted while in active service in Military as Private in Co H 34 Wisconsin Inf Vol: and said Pierre Houte was receiving a Pension on claim as stated above & His name is inscribed on the Rolls of the Detroit Pension agency Roll no 1426 Cert no 417889 all of the above testimony is by me given from a long and intimate acquaintance with Pierre Houte to wit as His wife and an intimate acquaintance previous to divorce of Mary T Miller & up to the date of the death of said Pierre Houte on May 7th A.D 1896

PENSION OCT 15 1898 U. S. OFFICE.

Clmt.
P.M. o.both.
Sol. was P.M.

Ruth Garrigan
Mattie T. Powers
If affiant signs by mark, two persons who can write sign here.

Clemence her X mark Houte
Signature of Affiant.

State of Michigan, County of Menominee, ss:

Sworn to and subscribed before me this 13th day of Sept, A. D. 1898, by the above-named affiant, and I certify that I read said affidavit to said affiant, including all the words erased, and all the words added, and acquainted Her with its contents before she executed the same. I further certify that I am in nowise interested in said case, nor am I concerned in its prosecution; and that said affiant is personally known to me, and that she is a credible person.

(L. S.)

Peter Garrigan
Official Signature.

Notary Public
Official Character.

I, clerk of the County Court in and for aforesaid County and State, do certify that Esq., who hath signed his name to the foregoing declaration and affidavit, was at the time of so doing in and for said County and State duly commissioned and sworn; that all his official acts are entitled to full faith and credit, and that his signature thereunto is genuine.

Witness my hand and seal of office, this day of 189 .

[L. S.]

Clerk of the

This affidavit may be sworn to before any officer authorized to administer oaths. If executed before a Notary or Justice, however, the certificate of Clerk of Court should be attached, showing official capacity of said Notary or Justice, if such certificate be not already on file.

ADDITIONAL EVIDENCE.

CLAIM OF

Clemence Hanter, × Wis. of Pierre "

Late in Co. "H" 34" Reg't. of Wis. Inf. Vols

Character of Claim.

Widow's Pension
General by New Law
No. 653,276

CLAIMANT'S AFFIDAVIT.

RECEIVED
OCT 17 1898
WESTERN DIVISION

FILED BY
J. B. Cralle & Co.,
Pension Attorneys,
CRALLE BUILDING,
108 C Street, N. W.,
WASHINGTON, D. C.

9176

3–1081.

S. S.

F. A. B.

PENSIONER DROPPED.

United States Pension Agency,

DETROIT, MICH.

NOV 11, 1909

Certificate No. 491236

Class ACT OF APRIL 19,'08,WIDOW

Pensioner Clemence Haute

Soldier Pierre

Service Pr. H. 34" Wis V. I.

The Commissioner of Pensions.

*SIR: I have the honor to report that the above-named pensioner who was last paid at $*12*, to* June 4, 1909 *has been dropped because of* death Oct. 14. 1909

Very respectfully,

O. A. Janes.

United States Pension Agent.

NOTE.—Every name dropped to be thus reported at once, and when cause of dropping is death, state date of death when known.

o-9

CLAIMANT'S AFFIDAVIT.

State of Michigan County of Menominee, ss:

In the matter of Clemence Wid of Pierre Hauke

late a Private in Co. H of the 34

Reg't of Wis. Inft. Vols., for

On this 7 day of Feb, A. D., 1899, personally appeared before me, a Notary Public in and for the aforesaid County, duly authorized to administer oaths, Clemence Houk, aged 56 years, a resident of Nathan in the County of Menominee and State of Mich, whose Postoffice address is Nathan Mich and well known to me to be reputable and entitled to credit, and who, being duly sworn, declares as follows:

That She is the claimant in the above-mentioned cause, and that She was married to Jean Batiste Charlier in Belgium about 42 years ago and he died about 36 years ago in Belgium. My Fathers name was Eugene Accour, My mothers name was Hariet Accour and after the Death of my Husband I thought I should take my Maiden name of Accour and I gave that name to the justice of the Peace D. E. Moulle who marrid Pierre Hauk & myself and I was therefore married under the Name of Clemence Accour. it is the custom and Law in Belgium when a woman's husband dies and she gets married again she shall be married under her maiden name and I thought the same Custom and Law Prevaild in this County and that is the reason I gave my name as Accour. and further I am the Claimant in the above mentiond cause and am concerned in its Prosecution.

Hariet;

U. S. PENSION OFFICE.
MAR 24 1899

Jos Servais
Ruth Garrigan
If affiant signs by mark, two persons who can write sign here.

Clemence Her X mark Accour
Signature of Affiant.

Sait

State of Michigan, County of Menominee, ss:

Sworn to and subscribed before me this 6 day of Feb, A. D. 1899, by the above-named affiant , and I certify that I read said affidavit to said affiant , including all the words ______ erased, and all the words ______ added, and acquainted Her with its contents before she executed the same. I further certify that I am in nowise interested in said case, nor am I concerned in its prosecution; and that said affiant is personally known to me, and that she is a credible person.

(L. S.)

Peter Garrigan
Official Signature.

Notary Public.
Official Character.

I, ______ clerk of the County Court in and for aforesaid County and State, do certify that ______ Esq., who hath signed his name to the foregoing declaration and affidavit, was at the time of so doing ______ in and for said County and State duly commissioned and sworn; that all his official acts are entitled to full faith and credit, and that his signature thereunto is genuine.

Witness my hand and seal of office, this ______ day of ______ 189 .

______

[L. S.] Clerk of the ______

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RECEIVED
MAR 25 1899
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ADDITIONAL EVIDENCE.

CLAIM OF

Clemence Houle
Wid. of Pierre Houle
Late Private in Co. H 34 Reg't.
of Wis Inf. Vol Vols

Character of Claim.
Widow - New Law

No. 653,276

CLAIMANT'S AFFIDAVIT.

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